

Columbus County Board of Health

Minutes

☒ Regular Meeting ☐ Special Meeting

August 31, 2016 6:00 P.M.

Columbus County Health Department, 304 Jefferson Street, Whiteville NC

Members Present	Franklin Boone Dr. Darryl Diefes Dr. Nicole Martin Patty Hobbs Shane Cartrette Dr. George Floyd Dr. Christy Perdue Charles McDowell
Members Absent	Drew Cox, Dr. Randy Kirby
Staff Members Present	Kimberly L. Smith, Sandra Harrelson, Sarah Gray, Martha Faulk, Charlene Bush, Hilda Memory, Jamika Lynch, Tammy Robinson, Kristie Priest

Quorum was present.

Public Hearing was called to order by Dr. Nicole Martin, Vice-Chair at 6:00pm. Kimberly L. Smith read the "Public Hearing Rules". The only public comment was a letter from Martin B. Smith opposing the proposed "Regulations Governing the Location of Home Burial Sites, Church and Family Cemeteries in Columbus County." After a brief discussion, the regulations will be revised on **page 6, #7 to reflect "The minimum burial depth must be at least 18 inches. The topmost portion of the burial container must be at least 18 inches below the surface and in a water resistance container."**

A motion was made by Dr. Darryl Diefes to close the public hearing seconded by Patty Hobbs and carried by the board.

I. Call to Order

Dr. Nicole Martin called the meeting to order at 6:30 p.m.

II. Welcome/Invocation

Dr. Nicole Martin welcomed everyone to the meeting and asked for a moment of reflection for Peggy Blackmon, Board of Health member that passed away.

III. Approval of Agenda

Motion to accept the agenda by Charles McDowell seconded by Dr. Darryl Diefes and carried by the board.

IV. Public Comment

There were no comments from the public.

V. Approval of Minutes

A motion to accept the April 27, 2016 minutes by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the board.

<h3>VI. Quality Assurance</h3>	<p>Martha Faulk stated the following:</p> <p>A. Patient Satisfaction Survey Results-April, May, June <i>(Benchmark 9, Activity 9.5)</i> Overall the rate of excellence for questions range from 71% to 60%. Very Good range 17% to 20%. No specific consistent comments or suggestions except for the wait time and chairs in the lobby. I return calls on patients that request a follow-up call. I listen and engage conversation for improvement of services. All are cordial and receptive. If not at home, I leave only my extension number (if voice mail has been initiated) because they have caller ID. This way I do not give any information that may get to the wrong person and prevent a potential HIPAA violation. Dr. Darryl Diefes stated he had an incidental conversation that patient walked in and asked to sign HIPAA compliance forms, but was never presented any HIPAA compliance forms, just the paper to sign. Is that a concern? Martha stated, "it is a concern and I will follow-up on this." Diefes said it may be just the patient perception. He wanted to bring this to the attention of the health department. A motion to accept was made by Dr. Christy Perdue seconded by Charles McDowell and carried by the board.</p> <p>B. Quarterly Audit Results <i>(Benchmark 27, Activity 27.3, Benchmark 22, Activity 22.3)</i> In April we had some out-of-compliance issues on documentation. Providers notified and corrective action plan implemented. In July all audits had improved. Only one out-of-compliance issue and it was minor. A motion to accept was made by Dr. Darryl Diefes seconded by Dr. Christy Perdue and carried by the board.</p> <p>C. Review Corporate Compliance- <i>(Benchmark 36, activity 36.3)</i> The Corporate Compliance Team consists of the Management Team members. After a brief discussion of the revised plan</p>
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	<p>which would include the Board of Health to be notified of any complaints of fraud and abuse and if necessary will aid in selecting an outside audit.</p> <p>A motion to accept was made by Patty Hobbs seconded by Dr. Darryl Diefes and carried by the board.</p>
VII. Health Education	<p>Sarah Gray gave the following updates:</p> <p>A. Strategic Action Plan Update <i>(Benchmark 15, Activity 15.1, Benchmark 38, Activity 38.2)</i> Sarah reviewed the updates from the Strategic Action Plan. Dr. Darryl Diefes asked if there were any issues with language barriers. Kim Smith stated we had 3.5 translators on staff. Kim Smith stated the Health Department has been working with Hispanic/Latinos and increasing education is a priority.</p> <p>A motion to accept was made by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the board.</p> <p>B. Community Health Action Plan <i>(Benchmark 22, activity 22.1)</i> Based on the community health results in the 2015 CHA , the Healthy Columbus Taskforce determined the goals for our four-year plan and then developed objectives for the activities in our action plan. The top three community health concerns were Chronic Diseases, Substance Abuse, and Obesity.</p> <p>A motion to accept was made by Charles McDowell seconded by Patty Hobbs and carried by the board.</p> <p>Sarah introduced Darrell Trivette, Chief of Police in Chadbourn. He provided a brief update to the Board regarding substance abuse initiatives, such as the community watch program that had been created in Chadbourn through grant monies provided by the health department.</p>
VIII. Nursing	<p>Hilda Memory gave the following updates:</p> <p>A. Communicable Disease Comparison Annual Report <i>(Benchmark 2, Activity 2.4)</i> From data collected from 7/1/14-6/30/2015, Chlamydia was still ranked the highest STD and gonorrhea still a close second. We offer STD screening every day with education using the teach-back method regarding all STD's and how to prevent them. We provide free condoms for anyone that wants them. At all outreach activities, where it is allowed, STD education is provided. The numbers are up simply because people (of all ages) refuse to practice safe sex.</p> <p>A motion to accept was made by Charles McDowell seconded by Dr. Darryl Diefes and carried by the board.</p> <p>B. Maternal Characteristic Report <i>(Benchmark 19, Activity 19.1)</i> Total unduplicated maternal health patients for 2014 were</p>

	<p>231 and a total of unduplicated maternal health patients for 2016 were 162.</p> <p>A motion to accept was made by Charles McDowell seconded by Dr. Darryl Diefes and carried by the board.</p> <p>C. BOH Training-Family Planning (Benchmark 36, Activity 36.3)</p> <p>The primary mission is to reduce unintended pregnancies with a wide range of preventive care. All clients receive a periodic visit to establish an “annual examination date” once a year. Services include: contraceptive services, pregnancy testing, STD testing and related preventive health services.</p> <p>D. BOH Training-Maternal Health (Benchmark 36, Activity 36.3)</p> <p>Provide access to early and continuous prenatal and postpartum care. Services may include screenings, counseling and referrals for nutrition problems. The purpose of this is to provide healthy outcomes for both mother and baby while reducing infant mortality.</p> <p>E. Staffing Update (Benchmark 37, Activity 37.36)</p> <p>We now have Dr. Susan Aycock on staff twice a week for Family Planning and Colposcopy services. We are short a nurse in women’s health, but we have hired one to start on September 12th.</p>
IX. Social Work	<p>Tammy Robinson gave the following update:</p> <p>A. BOH Training Pregnancy Care Case Manager (Benchmark 19, Activity 19.1)</p> <p>Pregnancy Care Management services are for pregnant women enrolled in NC Medicaid, and to a limited number of low income, uninsured pregnant women. Our goal is to help the patient have a healthy pregnancy and a healthy baby. From May 15-August 15, 2016, there were 291 patients seen. 1214 assessments, 225 consultations and 1812 follow-ups.</p>
X. Financial Update	<p>Charlene Bush reviewed the following:</p> <p>A. Financial Statement—April, May, June (Benchmark 33, Activity 33.6, Benchmark 39, Activity 39.2)</p> <p>A motion to accept was made by Patty Hobbs seconded by George Floyd and carried by the board.</p> <p>B. Service Cost Update (Benchmark 39, Activity 39.2) (Benchmark 33, Activity 33.6)</p> <p>The only vaccine cost change was ProQuad from \$202 to \$204.</p> <p>A motion to accept was made by George Floyd seconded by Dr. Christy Perdue and carried by the board.</p> <p>C. Patient Counts (Benchmark 33, Activity 33.6)</p> <p>Patient counts were taken for each clinic from CureMD.</p>

	<p>D. Changes in Current Budgeted Funds <i>(Benchmark 33, Activity 33.1, 33.2, 33.6, 39.2)</i> County appropriated funding--\$1437997.00 was budgeted and we only used \$1142890.60. Taken out of escrow-Home Health Fund Balance-budgeted \$396252.00 and used \$344555.11.</p> <p>E. 2016/2017 Budget Update <i>(Benchmark 39, Activity 39.3)</i> Columbus County Commissioners accepted our budget.</p>
<p>XI. Environmental Health</p>	<p>Kristie Priest gave the following updates:</p> <p>A. Food and Lodging Report <i>(Benchmark 4, Activity 4.2)</i> For budget year 2015-2016, some of the inspections that were made are: 416 restaurant inspections, 27 school building inspections, 7 summer feeding sites and 2 local confinements. A motion to accept was made by Dr. Darryl Diefes seconded by Dr. Christy Perdue and carried by the board.</p> <p>B. Well Water Report <i>(Benchmark 4, Activity 4.2)</i> The number of permits issued for a new well has decreased due to the availability of county water throughout a large portion of the county. We issued 68 well permits and obtained 137 water samples for 2015-2016. Motion to accept was made by George Floyd seconded by Patty Hobbs and carried by the board.</p> <p>C. Pump System Type IIIB Inspection Report <i>(Benchmark 4, Activity 4.2)</i> Our office issues permits for pump systems that are required in certain circumstances in order to meet state regulations. State regulations require that the Health Department conduct follow-up visits to evaluate the performance of all pump systems that are permitted through our office. Inspections of Type IIIB systems are done every 5 years by Brandon Grigsby, Environmental Health Specialist. For budgeted year 2015-2016, he inspected 60 Type IIIB systems. Motion to accept was made by Dr. Darryl Diefes seconded by Dr. Christy Perdue and carried by the board.</p> <p>D. Engineered Option Permit 15A NCAC 18A.1971 <i>(Benchmark 4, Activity 4.2)</i> An engineered Option Permit on-site wastewater system, as defined by G.S. 130A-334(1g) is available to an owner that provides an alternative process for the siting, design, construction, approval, and operation of the system without requiring the direct oversight or approval of the local health department. An owner choosing this option shall employ the services of a registered professional engineer licensed pursuant to G.S. 89C to prepare signed and sealed drawings,</p>

	<p>specifications, plans and reports for the design, construction, operation and maintenance of the wastewater system.</p> <p>The local health department required responsibilities:</p> <ul style="list-style-type: none"> • Perform a completeness review of the notice of intent to construct • Attend the post-construction conference • File all documentation currently required at the local health department • Perform compliance inspections for Type IIIb systems • Investigate complaints <p>G.S. 130A-336.1 (f)</p> <p>The department, the department's authorized agents, or local health departments shall have no liability for wastewater systems designed, constructed, and installed pursuant to an engineered option permit.</p> <p>Fees-the local health department may assess a fee for the engineered option permit of up to thirty percent of the cumulative total for the fees the department has established to obtain an improvement permit, and authorization to construct, and an operations permit for wastewater systems under its jurisdiction.</p> <p>Our fee-\$215.00 30%=\$64.50</p> <p>Motion to accept was made by George Floyd seconded by Patty Hobbs and carried by the board.</p> <p>Dr. Darryl Diefes stated he would like the board to re-visit the possibility of adding fluoride to the County water system; it has been 10 years since we have addressed this. This would be the cheapest way to prevent dental decay and it would save tax payers a lot of money. We will need to explore the cost and the benefits.</p>
XII. Chairman's Forum	No comment
XIII. Director's Forum	<p>Kim Smith gave the following updates:</p> <p>A. Regulations Governing the Location of Home Burial Sites, Church and Family Cemeteries in Columbus County-Requesting Board Approval of Rules (Benchmark 34, Activity 34.4, 34.5)</p> <p>A motion was made to accept by Dr. Darryl Diefes seconded by Charles McDowell and carried by the board with the following changes, page 6, #7; "The minimum burial depth must be at least 18 inches. The topmost portion of the burial container must be at least 18 inches below the surface and in a water resistance container."</p> <p>B. HIPAA Risk Assessment (Benchmark 32, Activity 32.4)</p>

We have had the first phase of our assessment. We have made all of the corrections that we can at this point. We are now waiting for Mr. Clark to make a decision on our county's HIPAA Security Officer. It not only affects the health department, it affects the Department of Aging as well.

C. Home Health Update-

The Columbus County Commissioners have engaged CliftonLarsonAllen (a firm that completes our annual cost report) to sale or lease. We (Theresa Smith, Charlene Bush, Sandra Harrelson, and I) have had a conference call with Ron Clithrow to go over all the data elements that he will need to complete the information document for sale/lease.

D. Dental Update

(Benchmark 19, Activity 19.9, Benchmark 40, Activity 40.1)

Dr. Taylor returned on May 16 from maternity leave. We have approached the Charter School and Flemington Academy in reference to sending out our Toothmobile for next year. The dental staff have completed two outreach projects-Chadbourn "Back to School" event and proper brushing and nutrition education at a local daycare. More community involvement was mentioned on one of our satisfaction surveys, so we have met that suggestion. Thru our child health budget (state funds) we have budgeted about \$15,000 for dental work for un-insured children, we now have about \$8,000 left for the year.

E. Security Update

(Benchmark 30, Activity 30.1)

We now have in place the following:

- Panic buttons in all clinics, front office, and Environmental Health
- Redesigned the front office by installing protective glass at the front counter
- Installed paging capability down the Environmental Health hallway
- Hired a Security Officer
- Purchased metal detector at front entrance
- We have exercised our safety policy

F. Building Renovations

We have updated the front lobby restrooms, Lab restroom and replaced the flooring in several rooms including the conference room. We added security glass in the registration area and glass doors going into the clinic areas.

G. Eastpointe Kiosk

(Benchmark 41, Activity 41.2)

After a brief discussion this item was tabled.

H. Bad Debt Write-Off

(Benchmark 33, activity 33.7)

	<p>The total write-off for budget year 2015-2016 was \$4001.76, a decrease from last year by \$921.21.</p> <p>Motion was made to accept by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the board.</p> <p>I. Debt Set-Off <i>(Benchmark 33, Activity 33.7)</i></p> <p>The debt set-off for last year was \$3274.05, an increase from the previous year of \$991.88.</p> <p>Motion was made to accept by Dr. Darryl Diefes seconded by Patty Hobbs and carried by the board.</p> <p>We received information from our Southeastern Regional Office that our WIC agency was 1 of 4 selected as winners of the Gold Level Loving Support Award of Excellence. This award is for all the outstanding work in supporting breastfeeding mothers and their infants.</p>
Comments-Board of Health	None

Next Meeting Date

October 26, 2016 at 6:00 pm

Adjournment:

Respectfully submitted: Kimberly L Smith
 Signature

Secretary 092216
 Date