

# Columbus County Board of Health

## Minutes

☒ Regular Meeting    ☐ Special Meeting

**August 29, 2018 6:00 P.M.**

**Columbus County Health Department, 304 Jefferson Street, Whiteville NC**

<b>Members Present</b>	Dr. Randy Kirby Franklin Boone Patty Hobbs Dr. Nicole Martin Pat Ray Drew Cox Shane Cartrette Dr. Christy Perdue
<b>Members Absent</b>	Dr. George Floyd, Dr. Darryl Diefes, Charles McDowell
<b>Staff Members Present</b>	Kimberly L. Smith, Yvonne Richardson, Patti Nance, Mindy Caines, Charlene Bush, Kristie Priest, Lorraine Matthews, Daniel Buck
<b>Guests</b>	

**Quorum was present.**

### **I. Call to Order**

Dr. Randy Kirby called the meeting to order at 6:01 p.m.

### **II. Welcome/Invocation**

Dr. Randy Kirby welcomed everyone to the meeting. Invocation was given by Pat Ray.

### **III. Approval of Agenda**

Motion to accept made by Dr. Nicole Martin seconded by Shane Cartrette and carried by the board.

### **IV. Public Comment**

There were no comments from the public.

### **V. Approval of Minutes**

Motion to accept was made by Patty Hobbs seconded by Pat Ray and carried by the board.

<b>VI. Nursing</b>	<p>Patti Nance, Nursing Director gave the following update:</p> <p><b>A. BOH Update STD</b>  <i>(Benchmark 36, Activity 36.3)</i></p> <ul style="list-style-type: none"> <li>• I have included a graph.</li> <li>• New HIV cases are up by two from 14 last year to 16 for the 17/18 fiscal year.</li> <li>• New Syphilis cases are down by 8 from 17 last year to 9 for the 17/18 fiscal year.</li> <li>• New Chlamydia cases have only increased by 2 from last year from 335 to 337 for the 17/18 fiscal year. <ul style="list-style-type: none"> <li>○ 36% are aged 15 – 19</li> <li>○ 38% are aged 20 – 25</li> <li>○ 20% are aged 26 – 39</li> <li>○ 6% are aged 40 – 60</li> </ul> </li> <li>• New Gonorrhea cases have increased by 78 from 188 last year to 266 for the 17/18 fiscal year. <ul style="list-style-type: none"> <li>○ 18% are aged 13 – 19</li> <li>○ 30% are aged 20 – 25</li> <li>○ 38% are aged 26 – 39</li> <li>○ 14% are aged 40 – 64</li> </ul> </li> <li>• I do know that we have Teen Sex Education in the Whiteville City Schools. That was my reason for going back and looking at the numbers, was to see what the ages were, and if we needed to target the schools. I know Jamika and Daniel have had problems getting into the county schools, yet they are welcomed in the Whiteville school system. So maybe this is something we need to push a little harder on to get some of these numbers down.</li> </ul> <p><b>B. Rabies Rate</b>  <i>(Benchmark 38, Activity 38.1)(Benchmark 15, Activity 15.2)</i></p> <ul style="list-style-type: none"> <li>• For the 2017/2018 fiscal year we have treated 7 individuals.</li> <li>• We have had the following bites reported: <ul style="list-style-type: none"> <li>○ Dog: 24</li> <li>○ Cat: 3</li> <li>○ Raccoon: 1</li> </ul> </li> </ul> <p><b>C. Vaccination for Health Department Personnel Policy and Procedure</b></p> <ul style="list-style-type: none"> <li>• This policy had not been revised since 10/25/2017. I went through and made some basic grammatical and spelling changes. The major change that was made, can be found on page 2 of 9, where it states exemptions from required vaccinations will be</li> </ul>
--------------------	--

made only in the following circumstances:

- Medical exemption; written notice from physician is required.

What we included here was from the General Statutes 130A-156. It states the following:

- If a physician licensed to practice medicine in this State certifies that a required immunization is or may be detrimental to a person's health due to the presence of one of the contraindications adopted by the Commission, the person is not required to receive the specified immunization as long as the contraindication persists. The State Health Director may, upon request by a physician licensed to practice medicine in this State, grant a medical exemption to a required immunization for a contraindication not on the list adopted by the Commission.

- They do have a Physicians Request for Medical Exemption Form, that is provided through the Department of Health and Human Services (DHHS). This form will need to be filled out.
- The next bullet we changed, previously stated "religious exemption written notice from clergy/chaplain or leader of an organized religious organization required." The new General Statutes 130A-157 states the following:
  - If the bona fide religious beliefs of an adult or the parent, guardian or person in loco parentis of a child are contrary to the immunization requirements contained in this Part [Chapter 130A, Article 6, Part B], the adult or the child shall be exempt from the requirements. Upon submission of a written statement of the bona fide religious beliefs and opposition to the immunization requirements, the person may attend the college, university, school or facility without presenting a certificate of immunization.
- This states that the individual can write their own statement that it does not have to come from a member of the clergy or a chaplain; and it does not have to be an organized religion.

Motion to accept the Vaccinations for Health Department



Personnel Policy and Procedure was made by Pat Ray, seconded by Patty Hobbs, carried by the board.

- Franklin Boone asked about the chlamydia and gonorrhea, if there was a racial or geographical breakdown, like cities or towns, to the STD data. Kim Smith replied that we might be able to break it down by zip code.
- Franklin Boone also asked if there was a simple treatment for this. I'm wondering why these STD's keep rising, when there is HIV out there. Is the treatment so simple that I get treated today and I'm back at it tomorrow? Kim Smith replied yes, it's that simple. We see repeat patients quite often. We try to educate them, but we can't turn them away, no matter how often they come back.
- Shane Cartrette asked about the trouble the Health Department was having getting into the county school system, for educating the students on STD's. He wanted to know what kind of issues we were having. Patti Nance replied that they are just saying no. Patti Nance asked Daniel Buck had the school board been approached. Daniel Buck replied that the board had not been approached this year, but they have been in the past. There are a lot of issues around religious, moral and ethical beliefs. The program we promote "Making Proud Choices", teaches abstinence and it also teaches students on what to do to keep from getting pregnant, and to keep from getting an STI (Sexually Transmitted Infection). They think that this kind of education leads to us promoting sex is what we've heard. Shane Cartrette asked Daniel Buck who is "they". Daniel Buck replied the principals and the school board. Shane Cartrette replied, so you have not taken it to the school board. Kim Smith answered, not this year; two years ago is when we last went to the school board. Shane Cartrette then asked if this was something that needed to be taken before the board every year for approval; did we take it before the Whiteville School Board to get approval? Kim Smith replied no, we just went to some principals and then to the superintendent. Shane Cartrette then asked why couldn't we take it before the school board and ask them. Patti Nance answered that she agrees. This was one of my strategies to help decrease these numbers, was to try and push further

	<p>into the county schools. Kim Smith replied that we could certainly try again. Pat Ray added that statistics show that preventive education does not increase sexual activity. Daniel Buck added that the pre and posttest, which are administered to the students who take the course in the city schools, show that they choose to wait to have sex, after being educated about it. Dr. Randy Kirby added that this was a legacy item and it did not go forward before. Charlene Bush stated that a lot of principals didn't agree to it due to what some of the parents would say. They felt as though their children were not sexually active. Dr. Randy Kirby relayed that he feels as if everyone in here is saying the same thing, we should re-engage on this matter. Pat Ray added that this was a state mandated class and there are a lot of parents with their heads in the sand about sexual education. Drew Cox asked Daniel Buck how are you making initial contact; are you going to the principals or to the superintendents? Daniel Buck replied that he wasn't sure how it was done; this was before he started working here. Shane Cartrette asked if there was a possibility for the students to opt out. When you tend to give folks an option, it sometimes helps the situation. Kim Smith replied that her thoughts were to bring this issue back up after the election. Dr. Randy Kirby stated that at this point, the only way forward is that the Board of Health, mainly through the Director, needs to engage the Board of Education after the election. Is everyone comfortable with that? Does anybody see anything else they want to do in the interim? If this works for everyone we'll move on to the next item.</p>
<p><b>VII. Social Work</b></p>	<p>Mindy Caines, Social Work Director gave the following update:</p> <p><b>A. BOH Update Pregnancy Care Case Manager</b>  <i>(Benchmark 19, Activity 19.1)</i></p> <ul style="list-style-type: none"> <li>• In your packets you received a copy of our Pregnancy Case Management Update/Case Load Activity Report. This information is from a six month period, February 1<sup>st</sup>, 2018 to July 31<sup>st</sup>, 2018. We received the following: <ul style="list-style-type: none"> <li>○ Unique patients touched 315</li> <li>○ Cases open for services 161</li> <li>○ Clients that we were unable to contact 17</li> </ul> </li> </ul>



	<ul style="list-style-type: none"> <li>○ Clients that refused services 10</li> <li>○ Referrals that didn't meet criteria 71</li> <li>○ Cases closed when postpartum ended 98</li> <li>○ Rolled off/ Medicaid not reinstated 10</li> <li>○ Chart /cases reviewed 1065</li> <li>○ Practice encounters 325</li> <li>○ Professional encounters 66</li> <li>○ Community encounters 12</li> <li>○ Home visits 97</li> <li>○ Hospital visits 10</li> <li>○ Phone calls 1255</li> <li>○ Correspondences 528</li> <li>○ Advocacy 57</li> <li>○ Consultations 128</li> <li>○ Provided education 919</li> <li>○ Scheduling (arranged appts for clients) 29</li> <li>○ Assessments 1052</li> <li>○ Pregnancy Assessments 663</li> <li>○ Face-to-face encounters 426</li> </ul> <ul style="list-style-type: none"> <li>• Mindy Caines stated that the assessments number was high (1052) compared to the pregnancy assessments (663), due to completing more than one assessments for pregnant clients every three months.</li> <li>• The whole Case Management program, we've been documenting in CMIS (Case Management Information System). Now that they are working on the Medicaid, that's funded for us to go to another program, for documentation called Virtual Health and we will start that program in late October. Kim Smith added that this was in response to the Medicaid transformation.</li> <li>• Dr. Randy Kirby asked how does this compare to six months ago. This looks like we're doing good, but I don't know what to compare it to. Mindy Caines replied that it's actually about the same. A few services have gone. Kim Smith added that the State consultants feel as if no one should refuse. Mindy Caines added that she doesn't think they truly understand our county. They try to compare us to counties who have more resources.</li> </ul>
<b>VIII. Financial Update</b>	<p>Charlene Bush, Budget Director stated the following:</p> <p><b>A. Financial Statement June, July</b>  <i>(Benchmark 33, Activity 33.6)(Benchmark 39, Activity 39.2)</i></p> <ul style="list-style-type: none"> <li>• For the Financial Statement, you should have June and July in your packet, along with a Review</li> </ul>

	<p>Report.</p> <ul style="list-style-type: none"> <li>For the whole 2017-2018 Fiscal Year we used 95% of our budget.</li> </ul> <p>Motion to accept Financial Statement for June and July was made by Dr. Nicole Martin, seconded by Shane Cartrette, carried by the board.</p> <p><b>B. Service Cost Update</b>  <i>(Benchmark 39, Activity 39.2) (Benchmark 33, Activity 33.6)</i></p> <ul style="list-style-type: none"> <li>Proquad (MMR Varicella) went from \$215.00 to \$226.00.</li> </ul> <p>Motion to accept the Service Cost Update was made by Dr. Christy Perdue, seconded by Dr. Nicole Martin, carried by the board.</p> <p><b>C. Patient Counts</b>  <i>(Benchmark 33, Activity 33.6)</i></p> <ul style="list-style-type: none"> <li>If there are no questions about Patient Counts that's all I have.</li> </ul>
<p><b>IX. Environmental Health</b></p>	<p>Kristie Priest, Supervisor stated the following:</p> <p><b>A. SB711 NC Farm Act of NC (Raw Milk)</b></p> <ul style="list-style-type: none"> <li>I'm going to give you a couple updates on some law changes. The first one I have is on the dispensing of raw milk. It was approved as law, in July, that if you buy a cow, or are a partial owner of a cow, or a lactating animal, that you can use the raw milk from the animal; only for yourself or for your partial owner. You cannot sell it; but there are lots of concerns with the consumption of raw milk. Environmental Health currently does not inspect dairy farms. I know due to this change in law we'll be getting a lot of calls. There are lots of concerns across the state about raw milk being available now. The original law had stated that it could've been sold for consumption, but that was taken out.</li> <li>Shane Cartrette asked if we have concerns about the consumption of raw milk, is there something we can do to enlighten the public on the hazards of it. Kristie Priest replied that she was unsure if the state was going to send out some press releases on the subject for us to use, because a lot of people do not know the risk. Dr. Randy Kirby asked if someone was to call in tomorrow, do you know what you would say to them regarding this matter. Kristie Priest replied that no, she does not. I don't think the general public is aware that this law has been approved. We would have to get guidance from the state on what to relay to the public because we do</li> </ul>



not inspect dairy farms. Dr. Randy Kirby stated that whenever the state does release information, we can do what Shane Cartrette recommended, and that was to get it out in the paper for the public to know.

**C. HB573 Business and Regulatory Changes to Various State Laws (Wells)**

- A well serving a single-family dwelling can be permitted less than 100' to a septic system, and repair area, and would require a minimum of 20' of casing and 20' of grout.
- A shared well is required to be 100' from a septic system, and repair area, and requires a minimum of 20' of casing and 20' of grout.
- A well serving a lot, that has a septic system installed in saprolite, is required to be a minimum of 100' to the septic and repair area, and required to have a minimum of 20' of casing and 20' of grout.
- In Columbus County this is not going to be a problem. Due to the fact that we do everything we can to get that 50' minimum; because when you go to a lot and the well is 40' from the septic system, this causes all types of alarms for the home owner, as well as us. So we try to maintain 50'. The well drillers that we deal with, in Columbus County, always grout at 20', because that has been law for a while; and as for the footage for the casing, our well drillers surpass the minimum. So this is nothing new for them, but it is now law.

**D. HB374 Provide Further Regulatory Relief to the Citizens of NC**

- Temporary food establishments, like for the fair, carnival or a circus, we were allowed to issue permits where they could operate for a period of time, not to exceed 21 days, in one location. Now this has changed for some, and says that they can operate for a period of time, not exceed to 30 days, in one location. This also goes for a fair, carnival or circus. They added in that this could also include an agri-tourism event. This is a plus for Columbus County; considering we do have several agri-tourism events that occur in our county.
- The next part of this House Bill, that impacted Environmental Health, was improvements permit issued for a septic system. Those typically expire in five years. When the recession hit in 2008, causing the housing and construction market to go down,



	<p>the state started looking at ways to help people out who were in the process of getting a septic permit. We've had some extensions placed on septic permits that should have expired. The law now states that if a permit was issued between January 1<sup>st</sup>, 2000 to January 1<sup>st</sup>, 2015, which has not been acted on, and would have otherwise expired, shall remain valid until January 1<sup>st</sup>, 2020. This gives the homeowner's a little more time. There are stipulations to it; for instance, the lot cannot have changed in size and there cannot be a ditch put through the middle of the property. This is a good benefit to people.</p> <p><b>E. Service Utilization Report</b></p> <ul style="list-style-type: none"> <li>• In your packet you got a copy of our Yearly Septic Report shows the following: <ul style="list-style-type: none"> <li>○ New Improvement Permits = 218</li> <li>○ New Construction Authorizations = 153</li> <li>○ System Repairs = 106</li> </ul> </li> </ul> <p>This was from July 1<sup>st</sup>, 2017 thru June 30<sup>th</sup>, 2018. These numbers are up some from last year. If there aren't any questions, that's all I have.</p>
<p><b>X. Women's Infants and Children</b></p>	<p>Lorraine Matthews, WIC Director gave the following updates:</p> <ul style="list-style-type: none"> <li>• Before I get started, I just wanted to add to what Mindy was talking about with the Social Workers. The WIC program depends on the Social Workers helping us out with clients who have problems, and we are blessed with a wonderful Social Work staff. If we come in contact with clients, who have problems, we'll refer those clients to them; and we work back and forth with each other. We kind of try to look out for each other if we're trying to track someone down. There are clients who won't come to see them, but they'll come and see us. This is one thing about this agency, is that we work together to try and see about our clients.</li> </ul> <p><b>A. Update on WIC</b> (Benchmark 36, Activity 36.3)</p> <ul style="list-style-type: none"> <li>• Columbus County WIC Program is currently fully staffed</li> <li>• We completed implementation of E-WIC in North Carolina. The entire state is now using E-WIC. It allows our clients more flexibility with when they get their benefits, and when they have to use them. Overall it has gone very well. It gives them more</li> </ul>

	<p>opportunities to not have to get everything at once. North Carolina is currently two years ahead of other states with implementing E-WIC. They wanted to have it running by 2020.</p> <ul style="list-style-type: none"> <li>• NC Nutrition Services Branch has changed the 3 year contract for infant formula used by WIC clients effective 10/1/18. We had been using Similac Advance, and starting on 10/1/18 we'll be using Gerber Good Start. We've been notifying our clients, and the pediatric and prenatal practices, that this change is coming. Although we would like to see as many of our moms as possible breastfeeding. We have two breastfeeding peer counselors who work very closely with our staff in helping pregnant women with breastfeeding.</li> <li>• All participating Supermarkets and Pharmacies in Columbus County completed their required training to be approved WIC vendors.</li> <li>• WIC recently purchased seven new computers and peripherals to enhance our electronic health record (Crossroads).</li> </ul>
<b>XI. Health Education/Promotion</b>	<p>Daniel Buck, Health Promotion gave the following updates:</p> <p><b>A. Update Strategic Action Plan</b>  <i>(Benchmark 15, Activity 15.1)(Benchmark 38, Activity 38.2)</i></p> <ul style="list-style-type: none"> <li>• Around September of last year, we updated our Health Department Strategic Action Plan to run from 2017 to 2020. When we looked at the 2015 Community Health Assessment data, we picked out some different objectives that focus on what the population feels like are our biggest health concerns. A few of the items we were going to address were as follows: <ul style="list-style-type: none"> <li>○ Mass Media Interventions on Facebook to address chronic diseases like diabetes and BC (birth control).</li> <li>○ Provide evidence based programming</li> <li>○ Chronic disease self-management</li> <li>○ Reduce infant mortality and morbidity by providing 17P to mothers who are at risk of pre-term birth and provide them with educational brochures. This material would help to explain to them preventive measures on how to prevent pre-term birth.</li> </ul> </li> </ul> <p>An update on those, we've done some social media post and we've addressed several things about</p>



diabetes and obesity. We had put that we would address some cancer prevention initiatives on social media as well. We've addressed tobacco smoking; urging folks to reach out to NC Quit Line for free services.

- Just an update on our 17P, we are one year out, so keep in mind that the number we offer 17P to, we want that number to be lower; because that is our number for the population who is at risk of premature birth. Out of five who were offered 17P:
  - 1 took partial treatment and she carried to full term
  - Another denied and she is still pregnant
  - The other three patients took the full dose and have gone full term.
- So of the five we've had this year, we've had some really good outcomes. They've also been offered educational materials. Are there any questions? Dr. Randy Kirby asked Daniel Buck if he felt like the metrics for social media were about right; if he was getting the right mix of everyone. Daniel Buck replied that yes he does, from looking at it from the administrative point of view. He stated that we don't get much feedback from post, but we can see how many people are actually clicking on a link or viewing a post. In the past year, our followers have increased substantially.

Motion to accept the Update on the Strategic Action Plan was made by Pat Ray, seconded by Patty Hobbs, carried by the board.

**B. State of the County Health Report (SOTCH) Update**

*(Benchmark 1, Activity 1.1, 1.2, 1.3)*

- Previously I spoke with you all about the State of the County Health Report that was submitted in March. That was approved with no improvements to be made. I have here the email that was received from our State Consultant, just saying that they approved it, and there was no need for any corrective actions. If you would like to review this, I'd be glad to pass it around.
- Tomorrow we will be having our next Community Health Assessment meeting at 3pm, here at the Health Department. If you would like to come and join please do.

Motion to accept the SOTCH Update was made by Shane

	Cartrette, seconded by Dr. Nicole Martin, carried by the board.
<b>XII. Chairman's Forum</b>	Dr. Randy Kirby, Chairman gave the following update: <ul style="list-style-type: none"> <li>• Nothing to report</li> </ul>
<b>XIII. Director's Forum</b>	<p>Kim Smith, Health Director gave the following updates:</p> <p><b>A. CCHD Board of Health Training Policy</b>  <i>(Benchmark 36, Activity 36.3)</i></p> <ul style="list-style-type: none"> <li>• New changes that were made to this policy, you can find on page 2, towards the bottom where it states: <ul style="list-style-type: none"> <li>○ New and ongoing Board of Health members training must include the receiving of the orientation packet; and then we are going to use NC Institute for Public Health's website, for the training. I believe there are three modules, with each taking about an hour to complete.</li> </ul> </li> </ul> <p>Motion to accept the CCHD Board of Health Training Policy was made by Dr. Nicole Martin, seconded by Shane Cartrette, carried by the board.</p> <p><b>B. NC Division of Air Quality State-wide Review</b>  <i>(Benchmark 38, Activity 38.1)</i></p> <ul style="list-style-type: none"> <li>• The NC Division of Air Quality decided to undertake a statewide review of the current log fumigation facilities that are using methyl bromide. They also put out a message that the applications for several additional facilities are on hold; pending evaluation of requested information regarding their monitoring protocols, capture and control process, and the proposed operational limits. DAQ is notifying the five existing permitted facilities in our state, one being in Columbus County, that they are going to modify their permits to require the additional control measures, and appropriate monitoring protocols. So Malec Brothers will have to answer these questions, as well as Royal Pest, down in Chadbourn. Royal Pest is one of the existing facilities that will have to notify DAQ of the previously stated requirements.</li> <li>• When I received this phone call, I was so excited. The Acme-Delco Riegelwood (ADR) Concerned Citizens, they just went ballistic. They know this is not the end. Malec Brothers could come back and provide DAQ with all the answers that they are requesting. I'm just glad that DAQ stepped back and is now looking at the larger picture; especially since there are so many in our state. New Hanover</li> </ul>



alone has three; there is one in Wayne County, Camden, Halifax and Martin Counties, and of course Columbus and Bladen.

- I had received a courtesy call from the section chief of DAQ. He called me about an hour before the news went out. He said that the people we have in our county, are what changed this. Our folks made them step back and take a closer look, and now they are consulting with the Federal EPA on this. I'm extremely excited that we were able to get that, and someone listened.

#### **C. Bad Debt Write-Off**

*(Benchmark 33, Activity 33.7)*

- This year we have \$ 1,714.85. Last year's total was \$ 3,954.12.

Motion to accept the Bad Debt Write-Off was made by Dr. Nicole Martin, seconded by Pat Ray, carried by the board.

#### **D. Debt Set-Off**

*(Benchmark 33, Activity 33.7)*

- Debt Set-Off is when someone owes \$50 or more. We have their social security number; and Debt Set-Off is when we notify them that we are going to submit this to the State of North Carolina. Therefore, if they receive a refund, from their taxes, what they owe us will be deducted and then they'll get what is left. If they can come up with what is owed, within 30 days, then we'll cancel that.
- This year our Debt Set-Off amount, we were able to recover \$ 2,320.99
- Last year we collected \$ 3,258.25. All I can say is that we are collecting more upfront than we did last year.

Motion to accept the CCHD Board of Health Training Policy was made by Dr. Nicole Martin, seconded by Dr. Christy Perdue, carried by the board.

#### **E. New/Revised Policies**

*(Benchmark 15, Activity 15.5)*

- In your packet you were given a copy of policies that actually have changes made to them. The ones where the names were updated from Hilda Memory to Patti Nance, were not included. If you would like a copy of those, just let me know, I'd be glad to get you a copy.
- I actually have two updates. DEQ, tomorrow night from 6-7:30, at the Bladen County Cooperative Extension Center, will be holding an information

	<p>session on GenX. I plan on attending.</p> <ul style="list-style-type: none"><li>• Last meeting I told you that Riegelwood Sanitary district would use the County's water, by turning a switch. Unbeknown to me, the County's Public Utility Authority has changed the switch where they can no longer go in and turn the county water on and off. The county is going to start charging the Riegelwood Sanitary district for the water that they use. All of this was in the works before I had mentioned anything about GenX. The person who was over the Riegelwood Sanitary district was very upset about this.</li><li>• On August 1, 2018, we received our official notice for our accreditation. All of our data has to be submitted to them by November 1<sup>st</sup>. We have to also submit to them our top five site visit days and we chose March 6<sup>th</sup> &amp; 7<sup>th</sup> as our first choice. Our 2<sup>nd</sup> choice is also in March. Hopefully in the next week we'll learn when our site visit date is. Please keep in mind we'll need two to three Board of Health members to interview. Pat Ray added that they tend to ask general questions about the county. It's not lengthy, and it's not complicated. My experience is that it was more of a getting to know you.</li><li>• Dr. Randy Kirby asked if there were any questions or comments before closing; Pat Ray asked where would Trillium's walk in site, be located. Kim Smith replied that it would be located at the old Employment Security Office and I believe they are working on it now. I'm not sure when it will be available. As for their walk in clinic, it will be located here on the old Home Health hall. They wanted the upstairs but we have a lot of stuff up there. Port Health plans on taking over the middle to the end of September; with their clients entering and exiting the building at the end of the hall. Pat Ray also asked if they had signed contracts with some of the staff that had worked with East Pointe. Kim Smith replied that some of the folks she knew from East Pointe have gone to work for Trillium, and some of the contract staff in the county that worked for East Pointe, Trillium picked up. I haven't heard anyone mention about any issues with them switching over.</li></ul>



Comments-Board of Health	
--------------------------	--

Next Meeting Date

October 24, 2018 at 6:00 pm

Meeting Adjourned

Respectfully submitted: Kimberly R Smith Secretary 10/24/18  
Signature Date