

ORANGE COUNTY HEALTH DEPARTMENT MISSION STATEMENT: *To enhance the quality [of life, promote the health, and preserve the environment for all people in the Orange County community.*

THE ORANGE COUNTY BOARD OF HEALTH MET ON April 22, 2020 virtually via Go To Meeting.

BOARD OF HEALTH MEMBERS PRESENT: Jessica Frega, Chair, Jennifer Deyo, Vice-Chair, Keith Bagby, Bruce Baldwin, Liska Lackey, Sam Lasris, Commissioner Earl McKee, Lee Pickett, and Alison Stuebe.

BOARD OF HEALTH MEMBERS ABSENT: Aparna Jonnal and Timothy Smith.

STAFF PRESENT: Quintana Stewart, Health Director; Rebecca Crawford, Financial and Administrative Services Director; Victoria Hudson, Environmental Health Director; Donna King, Health Promotion & Education Services Director; Pamela McCall, Public Health Nursing Director; Kristin Prelipp, Communications Manager; Ashley Rawlinson, Healthy Carolinians Coordinator; Beverly Scurry, BOH Strategic Plan Manager; and La Toya Strange, Administrative Support I.

GUESTS PRESENT: Cayman Seider.

Jessica Frega, Chair, called the meeting to order at 7:05pm.

I. Public Comment for Items NOT on Printed Agenda: None.

II. Approval of the April 22, 2020 Agenda

Motion was made by Alison Stuebe to approve the agenda, seconded by Liska Lackey and carried without dissent.

III. Action Items (Consent)

A. Minutes of March 25, 2020 Meeting

Motion was made by Alison Stuebe to approve the minutes of March 2020, seconded by Liska Lackey and carried without dissent.

IV. Educational Sessions

A. Cardinal Annual Update

Lynn Inman, Community Engagement, along with Ric Bruton, Senior Community Executive, Cardinal Innovations, presented on how county funds are used to support Cardinal Innovations programming in Orange County (OC). Below are some highlights.

- Cardinal Innovations manages Medicaid State money; it does not perform any of the services. It aids in determining how much and to where the funds should be dispersed.
- Children services usually drop during the summer as the problems caused in a school setting aren't occurring outside of school; while, the number of adults that receive services remains stable during the year with an average of 650-780 seen any given month. Those receiving services are only counted once even if they have multiple diagnoses.
- Mr. Inman presented graphs that displayed Medicaid and State data pertaining to the:
 - Number of members served by age and diagnosis
 - Members served and expenses by service category
 - Members served and expenses amounts – crisis services
- Local Maintenance of Effort (MOE) Funding
 - The counties will give monies to support programs per part B of statute § 122C-115. Part D stipulates that counties aren't allowed to reduce the amount they contributed from the previous year; however, they're always able to increase the amount.
 - OC contributes \$1.3 million annually which is divided amongst many line items and entities.
- There are various programs that receive funding. Services that these programs provide include services to undocumented people, assisting DSS with placements and trauma focused therapy, crisis and language resource center. The biggest providers are Freedom House Recovery and UNC Department of Psychiatry.

The BOH members had questions that were addressed by Mr. Inman and Mr. Bruton.

B. 3rd Quarter Financial & Billing Dashboard Reports

Rebecca Crawford, Financial & Administrative Services Director, gave a report on the 3rd quarter revenue and billing accuracy. Her report is as follows:

- Total Health Department Budget vs. Actuals:
Average YTD monthly revenue in FY19-20 after the third quarter is \$220k/month or \$2.0M YTD, representing 56.3% of our overall budgeted revenue for the year. As usual though, the total third quarter revenue is skewed down due to the majority of state funds not eligible to be drawn in July (this is typical) and allocations of Medicaid Max funds will not be transferred into our budget until the end of the fiscal year. Expenses are above revenues, at 62.7% of the overall budget but on trend with prior fiscal years.
- Total Billing Accuracy:
The medical and dental billing accuracy measure continues to be a challenge as we work with UNC and the Dental EHR, Eaglesoft, to improve the accuracy of the reporting system for Health Department revenue and is not included in this quarter's dashboard.
- Dental Earned Revenue by Source:
The FY 19-20 average monthly revenue (\$49.4k/month) for the third quarter is above our budget projection (\$45k/month) and our FY 18-19 average of \$46.6k/month. We are seeing the direct impact of adding the additional Dental Hygienist in FY 18-19 and will potentially exceed our projected annual revenue related to this position (\$72,157) since the dental clinic is fully staffed. The dental clinic will most likely see a more immediate, negative impact on revenues than the medical clinics as a result of the severely

decreased operations and very limited appointments. FY 19-20 dental earned revenue totaled \$445k at the end of the third quarter compared to \$393k at the end of the FY 18-19 third quarter.

- Medical Earned Revenue by Source:

Medical earned revenue is currently below the budgeted projection for FY 19-20 (\$57k/month) at \$42k/month due to provider turnover and as clinic staff continue to work through issues with the billing in the Epic EMR. Most appointments returned to 30-minute lengths in January as the medical clinic is almost fully staffed. Our EMR Quality Improvement team called the "Epic Optimization Team" along with clinic staff have made a large amount of progress in improving revenue from medical clinic services from the Epic system and the monthly average revenue of \$42k/month is already higher than it was in FY 18-19 at \$35.5k/month. This improvement in billing processing will most likely help insulate the medical clinic from experiencing large revenue deficits until early FY 20-21. Medical clinic revenue totals \$378k after the third quarter FY 19-20 compared to \$320k after third quarter FY 18-19.

- Environmental Health Earned Revenue by Source:

Environmental Health earned revenue is currently below the budgeted projection for FY 19-20 (\$54k/month) at \$44.6k/month. It is a seasonal trend to see lower revenue in the first half of the year than in later quarters due to spring pool inspections; however, the decreased revenue is directly related to the limited number of temporary staff available to complete WTMP inspections. EH had 7 temporary Environmental Health Specialists (EHS) working regularly to complete the inspections at this time last year and now have only 3 temporary EHS working irregularly. We found it difficult to recruit and retain the temporary EHS this summer given the heat. As a result, permanent staff in EH are adding WTMP inspections to their current workloads in order to complete them as required by the end of the fiscal year. EH staff continue to inspect where able during the Stay at Home Order, which will result in only a slight decrease in projected revenue for the remainder of the FY. FY 19-20 YTD revenue totals \$401k compared to FY 18-19 YTD revenue of \$404k.

- Grants Fund Revenue:

FSA has drawn \$200k of the multi-year Kenan grant. Expenditures are tracking as anticipated and will continue to increase since we filled the vacant Navigator position in November. This position was dependent upon additional United Way funds in order to hire at the full time equivalent level, which were approved by the BOCC in September.

The BOH members had questions that were addressed by Ms. Crawford.

C. Accreditation Review/Update

Co-Accreditation Coordinators, Ashley Rawlinson and Rebecca Crawford, provided the Board with an overview of the accreditation process. Highlights of their presentation are below.

- The purpose of accreditation is to ensure that all NC health departments are meeting the 10 essential services. One of the benefits is that it assures a minimum standard for all health departments and to ensure the same level of service is provided at all local health departments (LHDs) across the state.
- As of May 2018, all LHDs in NC have been accredited at least once.

MINUTES - Draft
ORANGE COUNTY BOARD OF HEALTH
April 22, 2020

- The basic components of the process are:
 - Self-Assessment by the Agency
 - Health Department Self-Assessment Instrument (HDSAI) is completed by all health departments and submitted with all accreditation evidence.
 - Site Visit
 - A team of multidisciplinary team consisting of local public health professionals familiar with health departments, Environmental Health and the Board of Health will conduct a site visit and interviews.
 - Board Adjudication
 - After the visit, the OCHD will receive notification from the Accreditation Board that will state whether accreditation was granted.
 - Activities and Scoring Requirements
 - Agency Core Functions and Essential Services
 - Assessment – OCHD must meet 26 of 29 activities
 - Policy Development – OCHD must meet 23 of 26 activities
 - Assurance - OCHD must meet 34 of 38 activities
 - Facilities and Administrative Services - OCHD must meet 24 of 27 activities
 - Governance - OCHD must meet 24 of 27 activities
 - Most of the activities that affect the Board of Health are in the Governance standard. If an agency is assessed 4 or more “Not Mets” under Governance, they will not be recommended for reaccreditation — what the Board of Health does for local public health is very important, and the accreditation standards reflect this importance.
 - The Board of Health-related activities are placed into the following 5 categories: finance, community health, health director/staff, Board function and rules and ordinances. The Board’s requirements of tasks for each category was conveyed to them during the presentation.
 - The Law
 - NC health departments are required by General Statute to be accredited and maintain accreditation status. Additionally, G.S. 130A-34.4 states that by July 1, 2014, in order for a local health department to be eligible to receive state and federal public health funding from the Division of Public Health, they must obtain and maintain accreditation pursuant to G.S. 130A-34.1.
 - The “Roles and Responsibilities of Boards of Health Related to N.C. Local Health Department Accreditation (NCLHDA)” guide was reviewed with the Board. The NCLHDA is a general overview and tool that can be used by any Board of Health governance structure. There are also a number of activities for which the Health Director may serve as the designee for the BOH and there must be a link between the Board and Health Director demonstrating that the Board was updated, involved and engaged in the particular activity.
 - The guide breaks down the Board role into 5 types of involvement.
 - Ensure you have required policies, procedures or materials.
 - Hear or review LHD reports.
 - Discuss service costs, need for new/amended rules or ordinances. Documentation of this must be reflected in the minutes.
 - Approve fees and budgets.
 - Take other actions or be involved with efforts to assure the health department has what it needs to do its job.
 - What can you do to be a “good” BOH member?
 - Attend meetings regularly, so quorums are reached and, thus, required items can be approved on schedule.
-
-

- Document your activities regarding community health and contribute to discussion during Board meetings.
 - Carefully review meeting minutes to make sure your comments were captured.
- Complete required trainings promptly.

The BOH members had questions that were addressed by Ms. Rawlinson and Ms. Crawford.

D. Advisory Board Report

The Board accepted the information as presented in the Board of Health agenda packet. Beverly Scurry was unable to present due to technical difficulties. Jessica Frega asked the Board if there were any questions. There were none.

V. **Action Items (Non Consent)**

A. Physical Activity and Nutrition Grant Award

Jessica Frega, Chair, reminded all that the Physical Activity and Nutrition (PAN) subcommittee annually provides community support grant funds to both county school systems. The schools have an opportunity to apply for funds up to \$1,000 for projects that address physical activity and nutrition. The Board announced that Orange County Schools would be the recipients of two PAN grants of \$1,000 each.

Motion to award the amount of \$1,000 to the Orange County Schools to implement afterschool programs was made by Liska Lackey, seconded by Earl McKee, and carried without dissent.

Motion to fund the amount of \$1,000 to the Orange County Schools to implement functional wellness programs was made by Jennifer Deyo, seconded by Earl McKee, and carried without dissent.

VI. **Reports and Discussion with Possible Action**

A. Health Director Report

Highlights of Quintana Stewart's Health Director Report are below.

- New information was received at the FY 20-21 budget meeting with the County Manager regarding supporting the economic contingency plan for the remainder of this fiscal due to COVID-19 in which the following was requested:
 - Reduce spending, closely monitor revenue and expenditures, and implement a hiring freeze for non-mandatory/non-essential positions.
- The OCHD will still be able to hire for critical positions such as a dentist and nurses.
- The OCHD will be updating their budget and looking to make a few changes in response to the county's contingency plan. Revisions/reductions will not impact staff or any of our essential services.
- Board activities will not be affected at this time.*

- On April 9, 2020, Secretary Mandy Cohen waived accreditation and granted a 12 month extension for all fully accredited local health departments (LHDs) in NC.
- On April 15, 2020, Secretary Mandy Cohen issued a public health waiver to all LHDs in which they received six waivers that will not endanger public health and will provide necessary relief to allow us to focus efforts on responding to the COVID-19 pandemic. (See Health Director's report a for list of specific activities waived.)
- Orange County is currently ranked number 1 out of 100 counties in the state for its response rate to the Census.

* Jessica Frega, Chair, asked if it would be helpful not taking the BOH per diem to which Ms. Stewart replied it's up to the Board. Ms. Frega proposed to the Board the option of not accepting the per diem so that it can be used at the OCHD. Many Board members voiced their eagerness to do so. Board members that wished to do so were directed to send an email to La Toya Strange, specifying whether they wanted to forego their per diem for remainder of FY 19-20 and if they wanted their per diem to be used in a particular department.

The BOH members had questions that were addressed by Ms. Stewart.

B. COVID-19 Q & A

Quintana Stewart, Health Director, gave an update on the COVID-19 status in Orange County as well as took questions from the Board. Some highlights are below.

- As of today at 11am,
 - in NC, there are:
 - 7,220 confirmed lab cases
 - 242 deaths
 - 434 hospitalizations
 - UNC-Chapel Hill is at 63% capacity
 - UNC-Hillsborough is at 91% capacity
 - in OC, there are:
 - 195 confirmed lab cases
 - 7 deaths
 - 23 hospitalizations
 - 57 of the positive cases are being monitored; 21 of those cases will soon come off of isolation/monitoring which will leave 36 actively being monitored
- Governor Cooper shared the 3 T's in which he's looking for before lifting the executive orders.
 - Robust **Testing**
 - Aggressive contact **Tracing** in the state (OC never relaxed contact tracing.)
 - **Trend** - decrease in deaths, positive cases and hospitalizations
- There isn't an infinite number of tests. The guidance on testing has changed – testing anyone based on their symptoms. Asymptomatic and those with mild symptoms that are able to recover at home may not need to be tested. The state is not accepting asymptomatic cases to test. These cases may be tested thru a private lab.
- OCHD Environmental Health have been quite busy conducting routine checks and have been talking with retail and grocery stores to ensure they're following executive orders.
- Kristin Prelipp, Communication Manager, sent a press release on yesterday about the public health strike team created by the OCHD and Orange County Emergency Services in early April. The team has worked closely with representatives from UNC and Duke

University Hospitals. To get ahead of outbreaks, the strike team will provide ongoing education and guidance to those who work at high-risk facilities such as residential facilities as well as conduct swab testing, when required.

- Another communication tool headed by Ms. Prelipp is the Joint Information Center (JIC). The JIC's activities includes sending weekly press releases, responding to media inquiries, attending the Call Center which handles all non-medical calls, updating the dashboard on the OCHD website every Tuesday and Thursday to share demographic information mirroring what the state has.
- In response to a BOH member's question regarding extending current restrictions, Ms. Stewart stated that everyone is waiting on the Governor's response while also acknowledging that the OC COVID-19 policy group is having this discussion as well, that small businesses are suffering and schools are closed until May 15th. Commissioner Earl McKee added that he would support a gradual reopening.

C. Media Items

Kristin Prelipp, Communications Manager, briefly mentioned that all of the articles were COVID-19 related.

Media items were in the packet which focused on Orange County's events and our involvement in various efforts.

VIII. Board Comments.

Jessica Frega congratulated Co-chair, Jennifer Deyo, on the birth of her baby. Ms. Frega also suggested that the Board think about NALBOH in light of COVID-19 in case the conference takes place this year. Lee Pickett thanked the OCHD for doing their regular work in addition to performing COVID-19 related tasks. Lastly, Ms. Frega mentioned that notification of when the BOH Nursing representative recommendation would be added to the BOCC's agenda hasn't yet been received.

IV. Adjournment

Alison Stuebe moved to adjourn the meeting at 9:08pm and Liska Lackey seconded.

The next Board of Health Meeting will be held May 27, 2020 at 7:00pm with location TBD.

Respectfully submitted,

Quintana Stewart, MPA
Orange County Health Director
Secretary to the Board