Board Members Present:
J. Larry Crawford
Harriette Cyrus
Thomas Gilpin, Atty.
Donna Rumbaugh
Omayma T. Touma, MD
Kevin Yingling, MD

Board Members Absent:

Staff Members Present:
Michael Kilkenny, MD, MS, Physician Director
Tim Hazelett, Administrator
Jack Mease, Accountant
Elizabeth Ayers, Health & Wellness, PIO
Casey Napier, Accreditation Coordinator/Grant Writer
Debbie Ellison, Regional EPI
Rodney Melton, Sanitarian Supervisor
Teresa Mills, Regional Tobacco Coalition Coordinator
Laura Johnson
Deb Koester
Heather Wood, Nurse Practitioner
Jenny Erwin, RN

Non Staff Members Present:
Ron Forren, Chairman of the Board of the West Virginia Association of Local Health
Taylor Stuck, Herald-Dispatch

Called to order at 5:00 PM.

Approval of Minutes:
Ms. Cyrus made a motion to approve the July Board of Health Meeting Minutes, Mr. Crawford seconded, and the motion was approved.

Ron Forren, President of the West Virginia Local Health Incorporated, on behalf of the Board of Directors, thanked the Board of Health and Administrative Staff of Cabell-Huntington Health Department for acting as the fiscal agent for the past two and a half years. Through the active partnership between the Local Health Incorporated and the Association of Local Health Departments, much has been accomplished in the last two and a half years, including improved support, technical assistance, training and consultation, and 100% of local health departments in West Virginia are members of the association. The Board of Directors consists of 5 members, 2 of which are from Cabell County, Nancy Cartmill and Dr. Calvin Kent. Another member is Dr. Bill Neal, a pediatric cardiologist from Morgantown. Dr. Deb Koester provided the Board with a summary of activities that was accomplished with the Benedum funding, that will last through mid-2016. Mr. Gilpin complimented the letter Mr. Bundy sent to the Board.
Dr. Kilkenny presented the Board with the Cabell-Huntington Health Department’s Annual Report. The Annual Report summarizes a tremendous body of work that is done in the fiscal year ending June 30, 2015. Dr. Kilkenny commended the directors of all the departments for providing two months’ worth of regular reports as well as the annual report. Dr. Yingling said a great deal of the revenue from the state government funding looks uncertain. The Board has encouraged and supported the decision to invest in grant writing as an opportunity to enhance funding and expand services in the Health Department. Dr. Yingling suggested a focus should be on a strategic plan to address the decreasing state government funding and allows us to understand how to create revenue. How does the request for the levy go before the citizens of the county? So many times something that’s been in place for a long time stays the same, when in reality the request for the levy and the responsibility of the citizens of Cabell County to support the levy should be paced upon the needs and projections that are necessary to run the department in an effective way. How do we get to understanding what is the right request? Who decides what the levy is going to be and how might we effect the change? As the Health Department becomes more proactive and takes on more responsibilities and meets more needs, it’s going to need more support. The levy is a major component. Dr. Kilkenny said the first question speaks to the value of a report like this. The charts help make a strategic plan and does tell me we want to diversify our income streams. The levy is based on a percentage of a collected tax. We do have to look at grants and billing as other sources of income we can enhance. Dr. Yingling said the more focused attention that is brought to that in an organized way, the better the outcome. The grant dashboard was very helpful and correlated to the pie graph. It should be part of a strategic plan that the more attention we bring to it the more likely we are to be successful. Dr. Kilkenny said the second part is to how we approach the levy. The levy is a set percentage that we ask for. Though we may have some leeway to ask for a different percentage, at this time we have no plans to do so. Dr. Touma said it has always been a set percentage and the community has been very pleased with the services we provide. Mr. Gilpin said there may be a limited of total percentages that can be subject to the levy. Dr. Yingling stated that if there is a fixed amount of money being collected and allotted to a certain number of opportunities then there has to be a process in where the people who get the money can argue they deserve more. This is an incredibly important asset to this community and it needs to be properly supported. If the community expects it to be properly supported to do harm reduction and any other number of programs then they need to be willing to say it is worth more. Dr. Touma agrees that it is worth trying. Tim said the levy has increased in the last five years, Mr. Gilpin suggests a presentation on the process and background of the levy. Tim said part of the strategy is how we tell the public what we do. The Annual Report is something we can use to show the public what we do, how much money we get, and this is the product. By enhancing our value, we now have very sound evidence that the levy is supporting these functions. We now have two documents that we can take to the public and say why and what we have done. The last vote was 52 to 48%. We know what we have to do and will start at the end of this year. The levy is for a 5 year term. This levy does not end until June 30, 2017. Mrs. Rumbaugh asked if every county gets the same percentage. Tim said no, most counties do not get any levy funding. Deb said only four counties have levies and a third only get use of a facility from the local level funding. Dr. Kilkenny said we are very fortunate to have the levy and it has not crossed our minds to ask for more. We want to make sure we fully appreciate it and give the citizens a value for their dollar. Tim said the accreditation plays a role in it as well. By the time we start our community outreach, we have the Annual Report, the CHA, the CHIP, and we will also have the accreditation team on site in 2016. Mr. Gilpin asked if the levy election is in May and where do you go to process the request. Tim said yes we are putting on the ballot for May and we go to the County Commission. Mr. Gilpin said he really appreciates the effort that went into the Annual Report. It was both readable and depending upon things we accomplished.
Environmental Health/Threat Preparedness:
Rodney presented the Environmental Health and Threat Preparedness report. Dr. Touma asked how the dogs and cats get tested. Rodney said it depends on the situation. If it’s someone’s pet, we wait 10 days. If it is a stray we have to take it to a vet’s office for proper testing protocols, and send to Charleston for testing. Rodney made note that mosquito information was not on the report. We have pools that tested positive for West Nile Virus. We are still waiting on more information back to see if there are other locations positive in the county. The two locations that are positive are behind 16th street and Walnut Hills. They have been consistently positive through July and August. We automatically test certain locations and complaint based locations. Mr. Gilpin asked if there has been any transmission to humans. Rodney said not that we know of. Rodney said no more information on the blue green algae has been received. The water company did do a good job by moving the inlet. The water company used activated charcoal to remove the toxin from the water. The environmental chemicals we use all the time and weather conditions cause the algae. The Holiday Park plant is still not operational. The DEP and EPA are leaving it to us. Keith is designing individual on site systems for each one. The Rex Donahue location, Castle Gate and Mulberry, is now between lawyers getting easements or something to stop the sewage from being dumped into the stream. Dr. Yingling said unless doctors know there is a West Nile pocket in the community there is no reason to do any testing. If an advisory was put out, there would be more testing and more identification of human transmission of West Nile Virus. It won’t change how the patient is treated, but it might parallel the public health concern. Dr. Kilkenny said the press release was sent out today. The CDC’s report put out on September 15th reported no cases from WV. Dr. Yingling asked if more action would be taken if human disease was found. Dr. Kilkenny said possibly. We would know by the species and monitoring where to treat and how to treat the area.

IT:

Nursing:
The nursing report was accepted.

Epidemiology:
Debbie presented the Epidemiology report.

Health & Wellness Director/Public Information Officer (PIO):
Elizabeth presented the Health and Wellness report. Highlighting the Chronic Disease Self-Management classes taught at Highlawn Place that concluded in August, several back to school events including partnering with Cabell Huntington Hospital, and at the mall. Three AmeriCorps have been hired, two will be working in Health and Wellness teaching Chronic Disease Classes and one will work in the clinic. The state of WV received a grant for 15 AmeriCorps and Cabell County received 5 positions. Though each position is one year commitment, the grant will last for three years. Every year, we will ask for the contracts to be renewed. Full time positions must work a minimum of 36 hours a week while a part time position requires 900 hours per year. Dr. Yingling asked about the AmeriCorps assignments. Elizabeth said due to an abundance of diabetes and chronic disease self-management class requests, we need to have as many personnel trained to teach the classes. That will allow us to get more classes out into the community. Mr. Gilpin said he appreciates the format of this report and really likes the grant dashboard. Are the community meetings listed for the Harm Reduction Program being handled in or outside of the Health Department? Elizabeth said it varies. A lot of the meetings have been here, but it is promoted every time I go out in the community. Elizabeth asked the board if they like the media alert email she sends out every Friday. The board does like them. We were up to almost three million impressions in August. Dr. Yingling said the dollar equivalence part of the impressions was very impressive. Elizabeth said 83% of the impressions were earned, so we did not pay for them. Dr. Kilkenny said Elizabeth will be on channel 13 tonight to discuss West Nile.
Regional Tobacco Prevention Coordinator Report:
Teresa presented the Regional Tobacco Prevention Coordinator Report. Teresa did attend the NACCHO conference in Kansas City. The Wayne County Health Department has implemented a smoke free/tobacco free policy. As of August 3rd, you physically have to go outside the gate to smoke and employees are enforcing the policy by asking people to move behind the gate. Wayne and Mason County will be receiving two new barns that promote the Quit Line Information. The Mason County barn will be a Komen and Quit Line promotional barn, while the Wayne County barn will be strictly save face/spit tobacco barn. Dr. Touma commented on Cabell County having the highest rate of smoking among young teens. Teresa said the number is actually decreasing, though studies show that middle school and high school kids are now using more cigarettes. The RAZE member numbers in high school are decreasing. The legal age to purchase cigarettes or e-cigarettes is 18. Mr. Gilpin asked about the current demographics part of the report. Teresa said we are waiting on the new BRFSS numbers to come out. A tobacco tax increase is being looked at. Upcoming events in November and December will lay a foundation for legislature activities. Teresa said be prepared for a Clean Indoor Air challenge again this year. We will be challenged on a local level as well as the legislature trying to make it a statewide issue. Teresa will provide pictures of the barns once they are complete. The barns are leased for $500 for 5 years and are considered landmarks.

Accreditation Process Update:
Rodney said all the groups are still working and moving forward on completing their projects. The CHA was recently completed. Mr. Gilpin asked if the end of the year is still the target for application. Rodney said yes.

Financial Report:
Jack presented the financial reports for July and August. July cash expenses totaled $301,757.17, which was a little bit higher than previous months due to an extra pay period being in July. Total revenue for July was $363,186.66. Our revenues were 22% above our expenses. With 8.3% of the fiscal year ended we have brought in 9.6% of budget in revenues and expenses were 11.72% of our budget. In the month of August, we brought in $624,672.64 and spent $ 235,650.93. Our revenues for the month of August was 168% percent of our expenses and our year to date revenues are 86% higher than our expenses. With 16.67 % of the fiscal year over our expenditures are 17.1% of budget and receipts are 31.88% of budget. Mr. Crawford asked if we have had any negative effects by going to the 26 pay period. Jack said we went to the 26 pay period in January and has not affected us here. Mr. Gilpin asked about the OASIS status. Jack said we are caught up and have been paid everything. Mr. Gilpin said it looks like we are $360,000 ahead of last year in revenue.

Approval of Expenditures/Financial Report:
A motion to approve the expenditures was made by Dr. Touma, seconded by Dr. Yingling, and passed.

Administration:
Tim presented the administration report and biographical sketch of a training program we will have on October 15th. The board was invited to attend the PIO Training that will be from 8am to 4pm. If more than 75 people sign up to attend may move the location to the St. Mary’s Training Center. Mr. Gilpin asked about the ADA requirement for the parking lot. Tim said for accreditation, we have to become ADA compliant. Bryan and Randall have taken that position upon themselves. Our handicapped parking spaces had to become ADA compliant for van accessibility, which has been completed. Dr. Yingling asked if we had to put up signs. Tim said no, signs are not required. Mr. Gilpin asked if the Michigan Association of Local Health was just our information. Tim said yes, and will share additional information in the executive session. Mr. Gilpin asked about the number of response to the Performance Management and Quality Improvement Survey. Tim said we had a really good response rate, 92%. We compared leadership responses to the staff responses. We will present this to the staff
in the October staff meeting. Dr. Yingling said the area that seemed the most discouraged was on IT support, which seems to be a reoccurring area of consummation by everyone. What is being done to address it? Tim said it will be discussed in the executive session. Dr. Yingling asked what resources need to be allocated. Tim said if you go back to the Michigan report, it says technology is one of the key strong components in having a progressive health department. Mr. Gilpin asked if the MOU with the School of Pharmacy is pertaining to one student for five weeks. Tim said yes, one student at a time for five weeks. We have a good problem that we have to deal with. We need to do a better job to coordinate the student rotations. We are not going to stop it, we are just going to do a better job at coordinating the situation.

**Community Health Assessment:**
The board received a copy of the 2015 annual update of the Community Health Assessment. Dr. Kilkenny said this document required a tremendous amount of work. The most recent valid data was collected to base our health assessment on. The health assessment is a vital living document that tells us what actions we need to take. The CHA drives the CHIP, which drive our Strategic Plan. This document is a keystone document for all that we will be doing and is vital to other agencies in the community. Every major health care entity has to have a CHA. Each of those CHAs have a basic set of data that is in our CHA. We produced this with our partners help through the Regional Health Connect. Our partners told us what things are of concern to them, gave us data, and they will help us prioritize these findings and develop the Community Health Improvement Plan. Mr. Gilpin asked if it is posted on our website. Yes. Dr. Yingling said it is so incredible, he couldn’t stop reading it.

**Harm Reduction Program:**
Dr. Kilkenny said the Harm Reduction Program began September 2nd and is the first Harm Reduction Program in the state of WV in a local health department. We saw a total of 15 clients the 1st week, 21 the 2nd, 42 the 3rd week, and 54 today, which equals 111 individuals. We are getting people back and providing other services. 20 of the 54 today were returning clients. We have been able to engage clients with the recovery coaches, though we can’t site any one person who has entered treatment yet. There is a lack of capacity for treatment in this community. We have given out 3000 needles so far. Each individual is getting 30 to 40 syringes. Mr. Gilpin asked if we are counting the number of syringes returned. Dr. Kilkenny said we are estimating the number by the weight of the sharps container. Jenny said we are progressing to a one on one exchange process. With a limit of 40, we are giving clients syringes based on the number of uses throughout the week. We are talking to them about safe practices, including how to clean needles with bleach in between uses. Dr. Kilkenny said we are learning a great deal more about the behavior of our clients. Some of them do inject 70 times a week or 10 times a day. Mr. Gilpin asked if we still have an adequate supply. Tim said we received 75,000 syringes about 2 weeks ago and currently have about 88,500 in inventory. Mr. Gilpin said the new health director of Kanawha Charleston Health Department gave props to the CHHD and hopes to model their program after what we are doing here. Tim said Wheeling Board of Health did the same thing. Dr. Yingling said it’s amazing how many people are acknowledging the program. Addiction is across all class, age, gender, and sectors. Mr. Gilpin asked if the rate of Hepatitis C is translating into pressure on the provision of health care for those people. Dr. Kilkenny said Hepatitis C is quite a burden to the health care system and insurance. Dr. Yingling asked about the Ryan White Program having an inactive status in the 2nd quarter of the Strategic Plan update. Tim said the School of Medicine has a program available, so we don’t need to pursue a program at this facility. Dr. Yingling asked if all Hepatitis C patients are being referred there no matter where they are identified at. Jenny said we test, notify, and refer patients who test positive. The educational component of it is if you don’t want to be referred out you should at least speak to your personal physician. Dr. Yingling asked if every person has the option to receive scripted care. Jenny said we give the patient the option of who to follow up with. Dr. Yingling said most primary care physicians don’t want this responsibility. You are at risk, this a public health matter, and you should be referred to the professionals that are absolutely prepared to take care
of this. Jenny said we offer the service as a courtesy, there is no written policy on what to do. The issue is noncompliance. Mr. Gilpin asked if we are collecting zip code data and if so are we getting a lot of people from Cabell County. Jenny said at first we actually saw more from other areas, but in the last few weeks most clients have had Cabell County zip codes. We are being told that more people would come if they had transportation. Mr. Gilpin said that a question about taking this program out to the people was asked at the press conference. The response was that we will be gathering zip code data to identify where it would be worthwhile to make that effort. Dr. Kilkenny said we will also use the Cape 2 study data, which includes drug deal and overdose locations, to identify potential locations. A great many of the users do not drive. Mrs. Rumbaugh asked what citizens who call in are being told on how to handle a needle. Dr. Kilkenny said if they find a needle and call here, we will go get the needle(s). If they have household syringes they need advice on, we can tell them how to properly handle them. Mrs. Rumbaugh said four syringes were found during the West End cleanup. 

The Board adjourned to executive session at 6:35pm. 

The Board called regular session back to order at 6:53pm. 

Mr. Gilpin said an issue that has attracted our attention is the need for a different kind of position in our technology area. A proposal has been made to revise the job description for the existing GIS 2 position, which is vacant, and turn it into an Information Systems Manager 1 position. A functional job description has been prepared and will be available as part of the record of this open session. Mrs. Cyrus made a motion to revise the job description of the existing GIS 2 position to an Information Systems Manager 1 in accordance with the materials that will accompany the minutes of this meeting. Mrs. Rumbaugh seconded the motion and it passed. Mr. Gilpin said as part of the job description that was just approved it will require a change in the reporting of that position on the Organizational Chart, so that the position will report to the Administrator rather than its current reporting spot. Mr. Crawford motioned for the organizational chart to be updated so that the Information Systems Manager 1 will report to the Administrator. Mrs. Cyrus seconded the motion, and it was approved. 

Dr. Yingling made a motion to approve the 2016 budget that is part of the Annual Plan that was previously approved and for it to be made effective as of July 1, 2015. Dr. Touma seconded the motion, and it passed. 

Jack assured the Board that there is no way for anyone to commit fraud here with the P-Card system. We have the strongest policy in place and the State Auditory Office uses us to test things out for them. 

Mr. Gilpin reported his attendance to the September 16th webinar on the responsibilities of the Local Public Health Department of Board. It was similar to presentation we had in the past in person. The materials will be posted and available online. It was a very good refresher to have. There will be future webinars in October on Infections Disease and Epidemiology and November on Environmental Health. You can access the webinars from anywhere at your leisure. 

Mr. Rumbaugh will be attending the State Auditors training in South Charleston. 

Dr. Touma motioned to adjourn, and passed. The meeting adjourned at 7:00 p.m.

The next regular Board meeting is scheduled for October 28, 2015 at 5:00 p.m.
Respectfully submitted,

Michael Kilkenny, MD, MS
Physician Director, Cabell-Huntington Health Department

Approved:

Thomas H. Gilpin, Chairman
Cabell-Huntington Board of Health