

**CABELL-HUNTINGTON HEALTH DEPARTMENT**  
*Board of Health Regular Meeting –January 23, 2019*

**Board Members Present:**

Kevin Yingling, MD  
Daniel Konrad  
Danny Porter  
Donna Rumbaugh  
Fred Kitchen

**Board Members Absent:**

Robert Sweeney

**Staff Members Present:**

Michael Kilkenny, MD, MS, Physician Director  
Tim Hazelett, Administrator  
Jack Mease, Accountant  
Elizabeth Adkins, Health and Wellness Director  
Kim Lockwood, Epidemiologist  
Teresa Mills, Prevention Coordinator  
Rodney Melton, Director of Environmental Health  
Tonya Chaney, Regional Epidemiologist  
Laura Johnson, Secretary  
Michelle Perdue, Harm Reduction Coordinator

**Visitors:**

Larry Crawford  
Alex Wilkins, WOWK

Mrs. Rumbaugh called the meeting to order at 5:04pm.

**Presentation**

Mr. Larry Crawford was presented an award for five years of dedicated service on the Cabell-Huntington Board of Health, including one year as president.

Mr. Crawford stated it was an honor and privilege to serve on the board. I have never found a more excellent organization of professional people. I am proud of your accomplishments and what you are going to accomplish throughout the years.

**Approval of Minutes:**

A motion to approve the November and December 2018 Board of Health meeting minutes as written was made by Dr. Yingling, seconded by Mr. Konrad and approved.

**Health Fair Quality Improvement Project**

Elizabeth Adkins presented the Health Fair Quality Improvement Project.

The agency has worked on this quality improvement project since April 2018. It is important for us to look at programs we do on a day to day basis and determine how we can improve them. Community outreach in Health and Wellness Department is not only a mandated service, but something we take pride in at the health department.

Team members included representatives from each department. Elizabeth Adkins serves as project Champion. Laura Johnson as administrative representative and team lead. Clinic representatives are Chad Helig – CDC PHAP, Megan Jarrett and Sharon Smith. Environmental Health representatives are Jodi Johnson and Bryan Maynard. Jaclyn Johnson is the Threat Preparedness representative. Health and Wellness representatives are Casey Napier and Teresa Mills. Background information – we participate in health fairs every month. We participated in 57 health fairs in 2018, which breaks down to 3-4 health fairs per month. Due to the amount of time it takes to participate in a health fair, we began looking at how we can improve the process and make it more cost effective. We defined, measured, analyzed, improved and are in the process of controlling our program outreach. In April, the team identified the problem as a lack of a systematic process to respond to health fairs as demonstrated by the inconsistencies and inefficient time spent in planning. This results in an increase in cost to the health department and a loss of value and quality of the product to the public. The team developed a goal find a systematic process for health fairs that is efficient, cost-effective and delivers the best quality product to the public.

Twenty-six steps were identified in the current process for accepted health fairs, involving fourteen individuals. The current cost is \$370.37 per fair, assuming it only went through Leadership once. The annual cost based on 25 health fairs is \$9,259.25.

Future processes eliminated several steps. We are still testing the system to verify all parts are functional. We moved to an online request, which is very efficient. There are 20 steps in the future process for accepted health fairs. The cost per fair went down to \$294.94 with an annual cost based on 25 fairs of \$7,373.50. The cost overall for accepted health fairs was reduced by 20%. The steps, totaling \$278.31, are unable to be impacted by the process. They are a requirement of current and future state process. The estimated savings for the health department is approximately \$1, 885.75 annually. Other areas of impact include staff development, consistent information provided to public by trained staff, staff teamwork and autonomy. Next steps: pilot – we are still working on the online process, implementing and monitoring changes, and subcommittees to continue to develop areas of standardization. The group also worked to update our branding. A nine panel display with information on all the programs and departments to take to health fairs was purchased. Dr. Yingling stated that is a brilliant demonstration project and commended staff. Dr. Yingling asked how the agency will decide what is the next group of projects to work on and the priority process? Elizabeth Adkins stated all departments are tasked to look at their programs and how to make them better. Business reviews are completed including cost analysis. Each department is to complete one quality improvement project per year. Mrs. Rumbaugh stated this demonstrates the professionalism of the group.

### **Environmental Health:**

Rodney Melton presented the Environmental Health report. Inspection back log is being addressed.

### **Threat Preparedness:**

Tim Hazelett presented the Threat Preparedness report. On January 9<sup>th</sup>, the Cabell-Huntington Health Department stood down our emergency operations in ICS command for the Hepatitis A Response. Jaclyn Johnson has filed all the paperwork to the state and local authorities. Dr. Yingling inquired on the HAM Operator Bundle Team drill. Tim Hazelett stated we have a communication center for emergency operations. A drill is conducted every quarter to verify radios are interoperable and operational at the national and local level. Bundle team is the name of the regional threat preparedness group made up of 9 counties. Dr. Yingling inquired on who will operate the radios. Through our MRC, a member of the Tri-State Amateur Radio Association would be onsite to operate our equipment. Mark Bradshaw, our maintenance worker is also an amateur radio operator. Mr. Porter asked if they are connected to the 911 emergency room. Yes, they are interoperable at this level. Mrs. Rumbaugh stated it is very important especially if the cell towers are down this would be the only method of communication. Dr. Jimmy Adams has helped us rebuild our system.

### **Regional Epidemiology:**

Tonya Chaney presented the Regional Epidemiology report, which included regional epidemiological trainings and meetings held in the past month, field and partner education that was completed, and disease investigation and surveillance undertaken. The Hepatitis A cases in Cabell County are coming back to normal.

### **Epidemiology:**

Kim Lockwood presented the Epidemiology report.

### **Nursing:**

Tim Hazelett presented the Nursing report. Dr. Yingling inquired on the backorder for Shingrix. Patients are put on a waiting list to receive the vaccine. Dr. Yingling asked if the volume of the flu vaccine is similar to last year. Dr. Kilkenny stated we see decreases every year for the past 5 years. We are giving fewer flu shots because it is available elsewhere. Our role in delivering flu shots is diminishing. Dr. Yingling stated in the past few years we have tried to extend the availability and access of flu vaccine, such as at pharmacies and physician's office. Expect the public health role to go down while the percentage of vaccination in county goes up, which demonstrates a good public health outcome. Tim Hazelett stated outreach clinics have increased. We will continue to promote and give it to Cabell County and City of Huntington residents at no cost. Mrs. Rumbaugh asked if we bill Medicare for shingles and pneumonia vaccines. No, we can't bill Medicare. We can bill Medicaid and other private insurances. Patients with Medicare are referred to the pharmacy or their private providers or have the option to pay out of pocket.

### **Harm Reduction Program**

Michelle Perdue presented the Harm Reduction report. Thommy Hill, the recovery coach, has taken a promotion and is no longer on site. Chad Helig, the Public Health Associate, has stepped into that role and is now the intake care coordinator. We are working on referrals until we can get another recovery coach. Patients are being sent to ProAct. We are working with Prestera to get two recovery coaches and Recovery Point for one recovery coach, to have a recovery coach here five days a week. Dr. Yingling asked if we support the recovery coach financially. Michelle Perdue said a grant does support the salary. Dr. Yingling inquired on the interagency relationship with referring patients to ProAct. We track how many times we send a referral. A referral form was created to track the number of patients referred to ProAct. The patient knows who to talk to at ProAct through this form. Dr. Yingling stated that is a brilliant process. In his view, we are at a point where we have stood up multiple programs to address addiction services. The challenge now is are people actually getting the services. What is the evidence they are getting services they need and if not, how do we make it happen? Michelle Perdue stated the form also discusses what a client can expect when going to ProAct. Dr. Yingling stated he is under the impression WV has a program where Medicaid recipients can get transport to their appointments. Would the program pay for the transportation for those Medicaid recipients to go to ProAct? Michelle Perdue will look into the program. Transportation is the biggest obstacle. Dr. Yingling inquired if we should think about setting up an Uber service or purchasing bus passes to get patients to their appointments. Michelle Perdue stated we can look into the restrictions with our grant funding. Mr. Konrad inquired on how the determination is made on who to refer to ProAct. The conversation is started with all the options available and matching the patient's desire and needs to services.

### **Information and Technology:**

Tim Hazelett presented the Information and Technology report. Mrs. Rumbaugh stated she is impressed with the number of unique visitors 45,000. Dr. Yingling stated the sites are very impressive and informative. It is a great promotion site.

### **Health & Wellness:**

Elizabeth Adkins presented the Health and Wellness report. For the month of November, 375 individuals were reached through community outreach. Seven people successfully completed the National Diabetes Prevention Program, with a 25% weight loss. We hosted the Huffington Post this past fall, who was interested in Hepatitis A. We received 22 million impressions from the one interview. Just under 2 million impressions were earned from the Hepatitis A Emergency Funding media campaign. The All Over Media company provided our messages at gas pumps up for an extra month. Teresa Mills is now tracking the number of motivational interviews she is conducting with clients who indicate a need or desire to quit smoking. Dr. Yingling asked if the recovery coaches are trained in motivational interviewing. Michelle Perdue stated they should be trained but is unsure if it is part of their class before being onsite.

A motion to approve the departmental reports as submitted and presented to the Board was made by Mr. Konrad, seconded by Mr. Kitchen and approved.

### **Financial Report:**

Jack Mease presented the November and December 2018 financial reports. Mr. Porter made a motion to approve the financial receipts as presented including the receipts and expenditures for November and December 2018. The motion was seconded by Mr. Konrad and approved.

### **Administration:**

Tim Hazelett presented the Administration Report. There are two items of business we need to request from the board. We have two vehicles that are inoperable and request the Board to approve public auction for the vehicles in accordance with the WV State Code. Dr. Yingling made a motion to publicly auction off the two inoperable vehicles. Mr. Kitchen seconded the motion and it was approved.

The second order of business is the By Laws. The Board must elect a new chairperson. Once elected, the By Laws will be presented at the February Board Meeting, which will give us 30 days for any changes. Mrs. Rumbaugh requested to change the statement that a new president takes over from the end of meeting to as soon as elected. Dr. Yingling made a motion to accept the amendment to the president taking over immediately after being elected. The motion was seconded by Mr. Konrad and approved. Board members were given an Emergency Funding update. We have not received any funding to date for the Regional Epidemiology contract. We are looking for changes to this process next year. Mr. Kitchen completed his first orientation meeting and will schedule a departmental meeting at his convenience. All board members are invited to attend the meeting. The meeting is an opportunity for each department to introduce their selves and provide agency education information.

Dr. Yingling nominated Mrs. Rumbaugh for chair and Mr. Konrad to be vice chair. Dr. Yingling moved to close nominations and nominations were closed. Mrs. Rumbaugh was voted in as chair and Mr. Konrad as vice chair of the Board of Health.

### **Physician Director's Report:**

Dr. Kilkenny presented the Physician Director's Report. The PHAB Accreditation Action Plan decision was presented to the Board. Eight measures were sent to the Public Health Accreditation Board for review. Seven are fully documented and demonstrated and one largely demonstrated. The review does not decide accreditation status. The accreditation board will make a decision on March 21<sup>st</sup>.

Hepatitis A effort have stood down from our emergency response. Each case is handled through our normal operation. Case load is down to about 2 cases per month. We are operating in support of the remainder of state who are operating under Health Command, which is the Bureau for Public Health

Emergency Response. We have acted on a request to transfer vaccine for first responders. Tonya Chaney is still actively working with other counties the region. Mr. Konrad asked about the risk factor for Hepatitis A in harm reduction population. Dr. Kilkenny stated the outbreak was not studied in the harm reduction participation. Michelle Perdue stated the state has recently began tracking. Testing is tracked in the Harm Reduction board report on a monthly basis. Patients are also asked if they have been vaccinated on the intake form. Those who have not been are encouraged to get vaccinated.

The injectable drug use population study conducted by Dr. Allen from the John Hopkins Bloomberg School of Public Health will be published in the American Public Health Journal tomorrow. The study took place in Huntington. Methodology focus of study presented a way for any community to identify the number of users. A toolkit has been developed, which includes a calculator that can be used by a jurisdiction. Any city can utilize the toolkit. The number must be known to treat for a disease epidemic. Cabell County was the only county utilized in this study. Dr. Yingling inquired on how the results compared to the initial estimates. Before we began a Harm Reduction Program, our initial estimation was 450. In 2016, the projected number was 3000. The population was studied in 2018. When looking at substance use disorder as a disease, there are three times the number of non-injectable drug use than injectable. Dr. Yingling stated this community is leading the way across the country.

#### Executive Session

The Board adjourned to executive session at 6:15pm.  
Regular session was called back to order at 7:05pm.  
No action was taken in the executive session.

Mr. Konrad made a motion to adjourned at 7:05pm.

The next regular Board meeting is scheduled for February 27, 2019 at 5:00 p.m.

Respectfully submitted,



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

Approved:



Donna Rumbaugh, Chair  
Cabell-Huntington Board of Health

