

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 November 18, 2015, at the Orange County Health Department, 300 West Tryon Street, Hillsborough, NC.

BOARD OF HEALTH MEMBERS PRESENT: Susan Elmore, Chair; Liska Lackey, Vice Chair; Commissioner Mia Burroughs, Barbara Chavious, Dan Dewitya, Jessica Frega, Sam Lasris, Reena Mehta and Timothy Smith.

BOARD OF HEALTH MEMBERS ABSENT: Paul Chelminski and Nick Galvez.

STAFF PRESENT: Dr. Colleen Bridger, Health Director; Christy Bridges, Physician Assistant; Alan Clapp, Environmental Health Director; Rebecca Crawford, Finance & Administrative Services Division Director; Robin Gasparini, Nursing Supervisor; Donna King, Health Promotion & Education Services Director; Pam McCall, Public Health Nursing Director; Andrea Mulholland, Family Nurse Practitioner II; Kimberlee Quatrone, Administrative Officer; Stacy Shelp, Communications Manager; Meredith Stewart, Public Health Program Manager; and La Toya Strange, Administrative Assistant II.

GUESTS PRESENT: None.

I. Welcome

Liska Lackey, Vice-Chair, called the meeting to order. She mentioned that Susan Elmore, Chair, would be arriving late.

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

III. Approval of the November 18, 2015 Agenda

Motion was made by Mia Burroughs to approve the agenda, seconded by Sam Lasris and carried without dissent.

IV. Action Items (Consent)

A. Minutes Approval of October 28, 2015 Meeting

Motion to approve Consent Agenda without corrections to the October 28, 2015 minutes was made by Dan Dewitya, seconded by Jessica Frega and carried without dissent.

B. 2016 Board of Health Schedule

Motion to approve Consent Agenda without corrections to the October 28, 2015 minutes was made by Dan Dewitya, seconded by Jessica Frega and carried without dissent.

V. Educational Sessions

A. Early Childhood Mental Health

Ennis Baker, Mental Health Specialist for Orange County Head Start/Early Head Start (OCHS/EHS) and co-chair of the Early Childhood Mental Health (ECMH) Task Force, began with an introduction of herself and an overview of OCHS/EHS. She had also provided a folder full of in depth information to BOH members about OCHS/EHS, various articles on ECMH and recommendations for improving early child development. Ms. Baker stated that OCHS is available to income-eligible 3-5 year olds living in Orange County while EHS is available to income-eligible pregnant women and children up to age 3. Ms. Baker stated that the OCHS/EHS:

- only serves the Orange County school district
- is serving 244 children under 5 years old including pregnant women
- provides high quality child care and education, parent education, comprehensive health, mental health & developmental screening and follow up
- provides in home visits and parent-child playgroups
- offers a variety of services with a team of specialists that includes bilingual family specialists and home visitors, child development specialists, health/nutrition specialist, mental health specialist and mental health consultant
- has a principle that states parents are a child's first and most important teacher
- focuses on building the capacities of adult caregivers to provide safe, stable and nurturing relationships and environments to promote young children's mental health as the adults who care for the children also need to be mentally healthy.

She continued by detailing the Orange/Chatham ECMH Task Force mission which is to support the social, emotional and mental health needs of children under 5 in Orange and Chatham Counties through advocacy, awareness, collaboration, collective action & evidence-based practice. She also highlighted some of the agencies that provide direct ECMH services to at-risk families in Orange County which included KidSCOPE and the OCHD.

Lastly, Ms. Baker gave an overview of some of the barriers and gaps in ECMH which include:

- limited services in other languages
- not enough screening for trauma, toxic stress and early signs of mental health (MH) for children and MH screening of their caregivers/parents
- MH services for adults are not accessed due to stigma, cost or being undocumented
- limited transportation options for low-income families to access high quality preschool
- no afterschool care (2p-5:30p) available for 4 year olds in OC school district Pre-K classrooms
- more calls for more attention being paid to early childhood & public health engagement around the early childhood years

Meredith Stewart, Public Health Program Manager, briefly discussed guidance for next steps. Ms. Stewart recommended that the Substance Abuse and Mental Health (SAMH) subcommittee consider facilitating conversations with the Family Success Alliance (FSA) regarding wrap-around care from 2:30-5:30 for NC Pre-K and OUTBoard/OPT and DSS regarding transportation to quality childcare. She also recommended that the SAMH review strategies to

increase screening for trauma, adverse childhood experiences and early sign of MH needs for children and parents in FSA zones and across the county.

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

B. Strategic Plan Update

Meredith Stewart, Public Health Program Manager, provided a review of the achievements and ongoing activities that resulted from the BOH 2014-2016 strategic plan. In spring 2016, the BOH will start on the next strategic plan based off the information from the Community Health Assessment. The BOH strategic plan is an innovative, prevention focused plan, aids in establishing the BOH as a leader in NC and in laying the groundwork for the Health In All Policies project. The BOH priorities are Substance Abuse & Mental Health (SAMH), Childhood & Family Obesity Prevention, and Access to Care. Board engagement with other boards and the community as a whole was also a focus. Ms. Stewart gave an overview of the accomplishments and activities which include:

- **SAMH**
 - 1st health department to dispense naloxone in NC and one of the 1st to have law enforcement equipped with naloxone (75% in Orange County).
 - Had 4 drug overdose reversals this past year.
 - New Campus and Community Director for Alcohol Initiatives position is currently in the hiring process which involves a great partnership among the UNC, the Health Department and the Town of Chapel Hill.
 - Hosted Raising of America this past June with over 60 people in attendance; Will continue to work with community to address the needs of early childhood and the policies needed.
 - Safe Syringe Initiative's goal is to reduce the re-use of syringes & spread of blood-borne infectious disease by increasing access to clean syringes. The SAMH committee will bring their final recommendation to BOH for discussion in January 2016.
- **Childhood & Family Obesity Prevention**
 - BOH has been looking at how child care centers can improve their nutrition.
 - Focused on school nutrition – new partnerships with No Kid Hungry NC (focuses on school breakfast and summer feeding programs) and UNC's Food for All (focuses on FSA zones).
- **Access to Care**
 - Advocating for policies to improve access to care.
 - Communicating about effective interventions and advocating for their funding.
 - Serving as catalyst/advocate for health outcomes in the FSA.
 - FSA's Zone Navigator Program utilizes 4 community members trained to provide support and resources to our families.
 - Kindergarten Readiness Program has a total of 66 families at 3 elementary school sites located within two FSA zones. Students enrolled in the kindergarten readiness programs were evaluated pre and post program utilizing the North Carolina Kindergarten Entrance Assessment and other tools to assess children in literacy, math, and social and emotional skills.

- The United Way/FSA Collaborative features 9 partner organizations working towards strengthening the pipeline, sharing measurement and streamlining referrals, program and services.
 - Fostering a culture of innovation. Innovation Grants projects from 2015 are wrapping up. There have been 24 Innovation Grant initial proposals which was an 85% increase from 2015. Twenty-one of the twenty-four proposals came from new applicants.
- **Engagement**
 - Staying up to date on the actions of other County advisory boards and continuing to develop policy statements on priority health areas.

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

C. Advisory Board Update

Receiving quarterly updates on the actions of other Orange County advisory boards was one of the action steps related to Engagement in the 2014-2016 Strategic Plan. Based on availability and relevancy to the BOH Strategic Plan priorities, Meredith Stewart provided a summary of pertinent actions and information from Orange County advisory boards from June 2015 to October 2015 as they relate to the BOH Strategic Plan priorities. Some highlights include:

- At the August 13, 2015 meeting, the Chapel Hill/Carrboro City Schools Board of Education approved an Emergency Epinephrine Auto-Injector policy which is related to the resolution that the BOH passed in August 2014 to support an NC Board of Pharmacy rule change that would allow school personnel to receive the prescription and training from their local public health department.
- At the September 17, 2015 meeting, the BOCC continued a discussion on their interest in putting a bond referendum on the November 2016 ballot. The referendum is expected to include significant funds for the school systems, as well as affordable housing.
- Healthy Carolinians of Orange County hosted community listening sessions around the county as part of the Community Health Assessment process. Results from the community survey and from focus groups were presented and participants took part in a voting/prioritization process. HOCC will hold their annual meeting on December 11, 2015 at the Whitted Human Services Center in Hillsborough.

The BOH members did not have any questions.

D. 1st Quarter Financial Reports and E. 1st Quarter Billing Dashboard Reports

Rebecca Crawford, Finance & Administrative Services Division Director, gave a report on the 1st quarter revenue and billing accuracy. Her report is as follows:

- Total Health Department Revenue: Average YTD monthly revenue in FY16 after the 1st Quarter is \$204k/month or \$593k YTD, representing 22% of our overall budgeted revenue for the year. This is a slight decrease from an average of \$205k/month in FY15. Expenses were in line with revenues at 21%.
- Total Billing Accuracy: Continuing with the goal of 90% billing accuracy set in FY 14-15, the average billing accuracy rate for medical at the beginning of FY 15-16 is 88% as

compared to 91% in FY 14-15 and the average rate for dental for FY 15-16 is 95% as compared to 96% in FY 14-15.

- Dental Earned Revenue by Source: FY 15-16 average monthly revenue (\$41k/month) is slightly below our budget projection (\$46k/month) but still above our FY 14-15 average of \$35k/month. FY 15-16 dental revenue totaled \$119k at the end of the first quarter. Dental earned revenue is historically lower in the first quarter of the fiscal year than in other quarters.
- Medical Earned Revenue by Source: Medical earned revenue is currently below the budgeted projection for FY 15-16. The monthly average after the first quarter (\$44k/month) is lower than FY15 (\$50k/y) and our budget projection (\$51k/month). This is mainly due to holding Maternal Health encounters for Global Billing (billing multiple encounters at the end of the pregnancy) and holding multiple program encounters until we come to a resolution with Medicaid of an acceptable method to bill same day appointments. We anticipate a solution by December 2015.

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

VI. Action Items (Non-Consent)

A. Fee & Eligibility Policy

Ms. Crawford provided an overview of the recommended changes to the Fee and Eligibility Policy that were reviewed at the October 2015 meeting. The BOH members did not have any questions.

Motion to accept the recommended changes to the Fee and Eligibility Policy without edits was made by Jessica Frega, seconded by Mia Burroughs and carried without dissent.

B. Elections (Chair & Vice-Chair)

The Board members shall elect a Chair and Vice-Chair by majority vote each year at the last meeting of the calendar year.

Motion to elect Liska Lackey to Chair for the 2016 calendar year and to elect Nick Galvez to Vice-Chair was made by Sam Lasris, seconded by Jessica Frega and carried without dissent.

VII. Reports and Discussion with Possible Action

A. Long Acting Reversible Contraceptives Report

Christy Bridges, Physician Assistant, gave a presentation on increasing long acting reversible contraceptive (LARC) use in Orange County Health Department family planning patients. She began by noting that 50% of pregnancies are unplanned in the United States. She also stated that LARCs do not require the user to take some sort of action every day or before every sexual encounter.

Ms. Bridges provided information on 3 kinds of LARCs – Nexplanon subdermal implant, Mirena IUD and Paraguard IUD. Their effectiveness ranged from a maximum of 3 years up to a maximum of 10-12 years. The associated costs (device and procedure) varied as well. In 2014-2015, 12% of women in the OCHD Family Planning Program were using LARCS with Nexplanon having the greatest use by our clients followed by the 2 IUDs Mirena and Paraguard, respectively. In the U.S., 7.2% of women ages 15-44 used LARCs. The Colorado Family Planning Initiative increased LARC use in Title X clinics from 4.5% in 2008 to 19.4% in 2011. The OCHD's goal is to meet and/or exceed Colorado's 19.4%.

She continued by stating that some possible barriers to LARCs were concerns regarding procedure and side effects as well as others' negative experiences. Cost was also a barrier as 59% of LARCs users were self-pay. Of that 59%, 84% of that group actually slid to 0% having to pay nothing. Ms. Bridges also noted some of the best practices for increasing LARC use which included offering LARCs first, leading with its benefits, exploring and incorporating patient preferences and reducing barriers such as cost and the number of appointments. The recommendation to the BOH was to:

- Move forward with high and moderate impact, low difficulty best practices
 - Exam room visuals; educational pamphlets, electronic promotion/outreach
 - Provider tip-sharing opportunities and staff education
- Support initiatives for high impact, moderate-high difficulty best practices
 - Consider video clip use and evaluate against organizational priorities
 - Support work toward identification of contraceptive tool at intake

The BOH members had questions that were addressed by Ms. Bridges and Dr. Bridger.

B. Radon Action Month

The NC Department of Health and Human Services Division of Health Service Regulation Radiation Protection Section has asked that the BOH recognize January as National Radon Month. Alan Clapp, Environmental Health Director, provided information on Radon Action Month as the OCHD is partnering with the NC Radon program to provide free short-term radon test kits in recognition of National Radon Action Month. A limited supply of 100 test kits for Orange County will be available from January 11th through January 29th. They will be distributed by Environmental Health.

Motion to pass the resolution to recognize January 2016 as Radon Action Month in Orange County was made by Sam Lasris, seconded by Barbara Chavious and carried without dissent.

The BOH members had questions that were addressed by Mr. Clapp.

C. Media Items

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

VIII. Closed Session to Discuss Health Director's Annual Review

Action taken in the closed session: The Board of Health unanimously voted to evaluate Dr. Bridger's job performance as "Excellent" for this year.

IX. Board Comments

No additional comments given.

X. Adjournment

Susan Elmore, Chair, adjourned the meeting.

The next Board of Health Meeting will be held January 27, 2016 at the Orange County Health Department, 300 West Tryon Street, Hillsborough, NC at 7:00 p.m.

Respectfully submitted,

Colleen Bridger, MPH, PhD
Orange County Health Director
Secretary to the Board

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