Buncombe County Department of Health Board Minutes April 14, 2011

The Buncombe County Board of Health held its monthly meeting at the Hughes Building, April 14, 2011.

Department of Health Board Members Present: Dr. Richard Oliver, Bill McElrath, L.C. Ray, Winnie Zeigler, Dr. David McClain, Dr. John Whitener and Gibbie Harris.

Staff Present: Julie Montanea, Lisa Eby, Jim Holland, Karan Smith, Rich Munger, Cynthia Yancey, Erin Henderlight and Terri Rogers

Chair, Dr. Oliver called the meeting to order at 6:10pm.

DISCUSSION & REVISION OF PROPOSED AGENDA/ADOPTION OF AGENDA

Dr. Oliver inquired if there were any discussion or revisions of the agenda. None mentioned.

MINUTES

The minutes of the March 10, 2011 Meeting were presented. Dr. Whitener made a motion to accept the minutes, seconded by Mr. McElrath.

QUESTION and ANSWER MONTHLY REPORTS:

Financial Report

The expenditure report shows that we are at 75% of the way into the budget year. A lower percentage of 42.22 % in Community Protection and Preparedness is due to the flu clinic costs that were contracted this year and expenses for pharmaceuticals were not as much.

The revenues for the year are showing under budget of approximately 311 thousand due to the Innovative Approaches grant that has not yet been received and the Add to County funds coming in at 87 thousand more.

HR Report

The HR report is above target.

Performance Analysis Review

The PAR for the Department of Health is in the packets.

Dr. Oliver stated that the graphs that are incorporated into the PAR are very helpful to see the increases and decreases that may occur. Mr. McElrath inquired to the increase in the WIC services all of a sudden compared to the past year where there was a decrease and asked if there were any reason that could explain that. Karan Smith explained that last year there were many complete families that were qualifying for household food stamps and the idea for some to also apply for and utilize services of WIC dropped. As the table is turned some there are more applicants looking for the WIC services this year. Also the birthrate has increased which will in turn have more new mothers looking for WIC services for those infants and children. Julie Montanea also shared that with the services and transition of prenatal care that there will show increases in family planning visits with the Department of Health.

Behavioral Health

Dr. Oliver asked Rich Munger if the jail diversion program is still doing well. Rich Munger shared that there are up to 100 people per month taken to the Emergency Room with Mental Health Issues instead of being taken to jail. Some tweaking may need done to assure that all those going to the ER are appropriate.

OLD BUSINESS:

A. FY12 Proposed Budget Approval-Jim Holland

Mr. Holland shared with the Board Members an updated FY12 Proposed Budget from the last meeting in March with slight changes. The major changes in the budget are Transition of Prenatal, Changes to MCC/CSC, Transition to Coxe Avenue, Increased Cost for Retirement Administration, Budgeting for Worker's Compensation, and Budgeting for Unemployment, Increase in Health Insurance, Continued Focus on Core Services.

The differences in the budget from FY11 to FY12 are:

Before County Increases:

Expenditure reduction of \$1,743,691 Revenue reduction of \$1,730,849 11% Expenditure reduction

After County Increases:

Expenditure \$1,197,495 Revenue reduction unchanged 7.5% Expenditure reduction

Dr. Oliver asked if there were any questions or comments about the FY12 Budget Proposal, Mr. McElrath made a motion to approve the FY12 Budget proposal, seconded by Dr. McClain, all were in favor motion passed.

NEW BUSINESS:

A. Staffing Report-Lisa Eby

Ms. Eby shared with the board members a reorganizational summary and Status of Employees in positions as of April 2011.

Physicians; 1 position affected RIF with early retirement moving to a contract position with WNCCHS to support transition to prenatal program.

Physician Extenders; 2 retained1 RIF with retirement and1 RIF

Public Health Nurses; 6 retained, 1 RIF with early retirement, 1 RIF who will most likely get a job through the Non-profit, 1 RIF with retirement.

Support Staff – CHAs, MOA, PAIIIs, Computer Tech; 1 transferred to vacant position, 3 RIFs - CHAs, 2 RIFs - PA IIIs, 1 RIF - Computer Support Tech I, MOA – vacancy due to turnover, PA IV – vacancy due to turnover.

Interpreters; 2 RIFs - interpreters - rehired through non-profit, 0.5 RIF - interpreter - rehired through non-profit.

Social Work; MCCs, CSCs; 3 RIFS with retirement and potential to be rehired through non-profit, 1 transferred to a position in child welfare, 9 RIFs will be eligible for positions transferred to non-profit.

School Health; Dental Hygienist 1 position affected – program eliminated as a County function.

PHRST Team; 3 RIFs with probable job offers from the State and 1 RIF with a physician retirement.

DIRECTORS REPORT: Gibbie Harris

A. County Health Rankings

Ms. Harris shared a document that shows the Health Outcomes and Health Factors of Buncombe and the overall State percentages from the March 30th released report. Out of 100 Counties in the State Buncombe County ranks 17th for the Health Outcomes and 3rd in for Health Factors. More information was sent to the Board Members

when this report was released with the website of www.countyhealthrankings.com to go to and get more detailed information.

B. Temporary Tattoo Permits

The County Commissioners and Health Director were contacted by an organization that is interested in getting temporary tattoo permits for an event they will be holding in Asheville in March 2012. They will be registering approximately 100 tattoo artists for this event and currently the County does not grant such temporary permits. The location of a tattoo salon is not what is permitted; it is the actual tattoo artist that is charged a fee. Environmental Health Staff would have to inspect and approve such person's and the manpower may or may not justify the fee that the permit would cost. Currently the fee is \$250.00 dollars annually and a fee of \$100.00 for such a temporary permit is being looked at but no final decision has been addressed. This is something that Ms. Harris will share with the board as things progress.

C. Legislative Update

Ms. Harris shared an update on the House Budget. She handed out a set of Senate and House Bills currently being discussed in our state. Many of them have changes that are related to Public Health.

Public Health

Maintained: Aid to County Funding -remained at \$11.4 million, School nurses and Oral health.

Proposed Cuts were Early intervention – 3.5 million (10 positions), Office of Minority Health - \$402, 262 (5 positions), Consolidate Office of Healthy Carolinians and Health Ed – 571,447 (10 positions), Accreditation – reduction of \$400,000.

Medicaid

Home Health (1.4 million in 2011/12 & 1.96 million in 2012/13), Provider Rates – 2% for every provider EXCEPT physicians, CCNC - expected to save the state \$80 million each year and Medical Home - Pregnancy initiative—save the state \$528,960 in 2011/12 & 3.457 million in 2012/13.

Environmental Health

Increase food and lodging fees, Abolish and repeal waste water discharge program, Abolish and repeal vector program, Abolish and repeal tick control program, Abolish and repeal private well program, Moves Grade A Milk and Bedding to Department of Agriculture, Moves Public Water Supply to Division of Water Resources in DENR, Moves Shellfish Sanitation and Recreational Water Quality and associated rule making to the Division of Marine Fisheries in DENR, and what remains of the Division of Environmental Health will go to the Division of Public Health – with no money.

Other

Smart Start - reduction of \$37,600.000 And Community Health grants - \$1.4 million reduction.

Special provisions:

Health Disparities Funds – will now be used to provide grants-in-aid to local health departments to close the gap in the health status of African-Americans, Hispanics/Latinos, and American Indians. LHDS will be required to demonstrate the substantial involvement and role American Indians tribes, faith-based organizations, and CBOs will play in fulfilling the goals and activities of the grant. HHS will be required to report to the GA how the activities implemented by the LHDS fulfilled the goal of reducing health disparities among minority populations, and the specific success in reducing particular incidences.

Funds for School Nurses has no reduction in funds but there are new requirements.

Funds shall be distributed to LHDS according to a formula that includes all of the following:

School nurse to student ratio, % of students eligible for free or reduced meals, % of children in poverty

Per capita income, Eligibility as a low wealth county, Mortality rates for children between 1 and 19, % of children with chronic illness and % of county population consisting of minority persons.

Another new requirement is that DPH shall ensure that school nurses funded with state funds do not assist in any instructional or administrative duties associated with a school's curriculum. The school nurses shall perform duties that include they be available to assist the county health department during a public health emergency.

<u>Food & Lodging Fees</u> – increase the annual fee to \$250.00 and reduce the fee of temporary permits to \$50.00. The state will receive 11% (same dollar amount as current) which is a % decrease for the state.

<u>Medicaid</u> – Local health departments are not included in the safety net provider's list that is exempt from provider rate reductions. Provider rates will decrease 2% (except for physicians who do not see a decrease in provider rates).

Ms. Harris handed out spreadsheets to the Board Members both with House Bills and Senate Bills that are being watched closely by public health officials. It will give a breakdown of the Bill title, Sponsor and Date & Status of each. In more detail she shared with them a printout of House Bill 200, Senate Bills 551 and 552, for more detailed reading.

CHAIR COMMENT:

The May Board Meeting on the 12th is a date that there is a conflict, therefore Dr. Oliver asked the Board if a survey could be done with them to decided on an alternative date, preferably in the same week. This survey will go out quickly and he asked that everyone please look at their availability.

PUBLIC COMMENT: None

A motion was made by Ms. Zeigler to adjourn, seconded meeting at 7:25 pm.	by 1	Mr.	Ray.	Chair,	Richard	Oliver	adjourned	the
Respectfully submitted:								
Gibbie Harris, Secretary								
Adopted:								
Richard Oliver, Chair								