

LUCAS COUNTY REGIONAL HEALTH DISTRICT
Board of Health Meeting
Department of Operations Center (DOC) #254

August 24, 2017– 8:30 A.M.

Dr. Donna Woodson, President, called the meeting to order at 8:30AM.

Kevin Pituch, Legal Counsel, performed the swearing in ceremony for Johnathon Ross, MD and Matthew Heyrman, and the reappointment of Perlean Griffin as members of the Board of Health.

Roll Call

A roll call was taken of Board members for attendance.

Present: Barbara Conover, Perlean Griffin, Matthew Heyrman, Ted Kaczorowski, Donald Murray, Robert Reinbolt, Johnathon Ross, MD, Donna Woodson, MD.

Absent: Reynald Debroas & Barbara Sarantou

Introduction of Guests

Eric Zgodzinski introduced guests. AFSCME and ONA representatives: Nate Fries and Cindy McLeod.

Staff & Others: Tina Stokes, David Welch, Shannon Lands, Kelly Burkholder-Allen, Rebecca Anderson, Kevin Pituch & Jim Walter (legal counsel), Lauren Lindstrom (Toledo Blade)

Additions/Deletions to Agenda

Eric Zgodzinski stated that he would like to add to the Prior Business section V, item “D” as Public Health Accreditation Board (PHAB) discussion.

Approval of Minutes from July 27, 2017

(Resolution 2017.08.108) A motion to approve the minutes of the July 27, 2017 Board of Health meeting as presented was made by Perlean Griffin and seconded by Matthew Heyrman. 8 yeas, 0 nays. Motion carried.

Approval of Payment for August Vouchers

Ted Kaczorowski, Chair of the Audit-Finance Committee, stated that the Committee reviewed the reports of the July Vouchers. There were a couple of employees who were traveling, the cost of which was covered by grant funding. There were some incentive cards presented to the FQHC Board Members who are patients at the clinics. Dr. Woodson reiterated that 51% of the FQHC Board Members must be patients at one of our clinics.

There was nothing else that needed to be addressed according to the committee chair. There were no questions from Board members.

(Resolution 2017.08.109) A motion was made by Matt Heyrman and seconded by Barbara Conover to approve the payment of the July Vouchers. 8 yeas, 0 nays. Motion carried.

Legal Update

Kevin Pituch stated that he would present his report during the Executive Session.

Executive Session

Dr. Woodson asked for a motion to enter into Executive Session for pending or imminent court action and appointment or employment of an employee.

(Resolution 2017.08.110) A motion was made by Barbara Conover and seconded by Ted Kaczorowski to enter into Executive Session. A roll call vote was taken. 8 yeas, 0 nays. Motion carried. The documented roll call vote will be added to the original minutes from this meeting.

Executive Session was entered into at 9:48 AM. Dr. Woodson asked Board Members, Clarence Coleman, Dave Welch, Shannon Lands and legal counsel Kevin Pituch to remain. Dr. Woodson excused everyone else from the meeting.

(Resolution 2017.08.111) A motion to return to Regular Session was made by Ted Kaczorowski and seconded by Donald Murray to return to the Regular Session at 10:20 AM. A roll call vote was taken. 8 yeas, 0 nays Motion carried.

Eric Zgodzinski stated there were no actions or votes taken during the session.

Prior Business

A. Board Training – this will be discussed at next month's meeting

B. Update on Improvement Plan

In regards to the resolution made by the board last month relative to Human Resource (HR) and looking at improving HR functions, we are in conversations with the County HR as well as entertaining resumes. We have received several resumes. A better report will be given to the board next month on our HR and any HR capabilities available.

In looking at restructuring our Fiscal Unit and making it more efficient, at this point in time the Health Commissioner has asked Clarence Coleman to come in and help us with CFO duties and remarked that Tina Stokes has been a stalwart in helping us understand where we are at with our budget. That will be a good team to get us moving in the right direction for the budget, issues of spending, saving and generation of revenue. Clarence has been asked to focus in on several things at this time: the budget in general, enhancement of revenue (includes billing), review the contract, see where we are at and obtain a larger percent of where we are right now. We are currently at 42%, we would like to get to 50%. Eric will be reviewing this next week with Clarence and Tina and asking Jim Walter to discuss any lack of contract work by the California Healthcare Medical Billing (CHMB), where they are faltering or not adhering to work promised. We will have a report for the board at the next meeting.

C. Position Classification Plan

- a. The Health Commissioner reported that we have been working on this plan for several months. We contracted with Joe Klep to assist with this process. The plan is focused on non-bargaining members from the E-5, E-6 & E-7 Categories. This class plan will categorize and classify individual duties; this will assist to form a better way of handling

any instances of bumping rights and/or needs. Next week Jim Walter (legal counsel) and Eric will be meeting with Joe Klep to go over the plan to find out determine what may be lacking. This will hopefully be presented next month as an actual Class plan for E-5, E-6 & E-7.

D. Public Health Accreditation Board (PHAB)

- a. Over the last three to four years we have been working on PHAB. We have great news! We have submitted all of our documentation to the Public Health Accreditation Board; effective last week on Friday afternoon. You will find in your packet a document of bullet points on PHAB. We would like to extend a huge thank you to Brandon Palinski and countless hours he has put in and the time and effort with his attention to detail. He has gone above and beyond, Eric reported.
 - i. The next steps with Accreditation:
 1. We submitted on Friday, August 18, 2017
 2. We have close to 350 individual examples to meet PHAB measures, this includes pulling documents, updating them or revising them to make sure they are still in effect and relevant to what we are doing.
 3. Our assigned Accreditation Specialist will review the documentation for completeness by the end of September, 2017, to make sure everything is dated, signed, properly oriented and in the correct location when we submit to PHAB.
 4. Site visit team will come to the department to review the documentation and make sure that it conforms to PHAB Standards and Measures. We are anticipating the site visit to be early next year. Probably in January or February but there is a small chance that it could be in December this year.
 5. Eric stated that the main concern of this Board is Domain 12. We will be discussing Domain 12 over the next couple of months so that we can be prepared if Board Members are asked to participate.
 6. The site visit will last 2 days. They will interview members of the Board of Health, the Health Commissioner, hold a Community Partners meeting and conduct specific interviews with Domain Champions; each Domain is led by directors and supervisors. It may be advantageous to have additional information put together for the board concerning Domain 12.
 7. The site visit team will report back to PHAB and they will make the decision on our Accreditation Status.
 8. We will be having a "mock" site review in the next few months and will have a better feel for the questions that they may ask. This will let us know if all the board members will be involved.

Eric stated that this has been a huge undertaking. Every health department in Ohio has to be accredited by 2020. If you do not become accredited there is a chance that you will lose grants, subsidies and funding. Departments that are behind in this process will have some real issues in the next year. We are well ahead of the curve.

We don't expect this, but if we are deficient in any of the domains there may be an action report, which must be corrected in a year. In reviewing a large number of documents that we submitted and the way we crafted things, we are very confident that we will go on the first round.

This was a great process because Directors and Supervisors were heavily involved. They reached down to staff to get information. We now have to push and get more staff involved in this process.

Shannon stated that when we pushed the button on Friday we received a confirmation email back from PHAB saying "thank you for submitting," and that our Accreditation Specialist would be in touch. At that point, Eric forwarded that email out to staff thanking them for their time and effort and attention to this much needed process.

(Matt Heyrman left meeting at 10:30AM)

New Business/Points for Consideration

A. Policy – Social Media

Shannon Lands stated that the Draft Social Media policy was sent to Board Members a few months ago. This policy has been discussed with our unions and has been vetted by legal. The Social Media policy focuses on people conducting themselves in a professional manner when they are on a social media platform. It outlines how social media is to be used at the health department, how you are to conduct yourselves on your personal page if you are identifying yourself as a health department member.

Eric Zgodzinski stated that we had an employee, last week, put something on Facebook. She was well intended but the wording could have been a little bit different. She was talked to by her Director and understands that what she did was not right. When talking about the department or something going on at the department, you need to be professional.

Shannon stated that she runs the social media for our health department. Many people come to her with questions on running an ad or whatever they want posted. This policy outlines that anything posted in regards to the health department must go through the PIO.

The question was asked on how we police our employees. Eric stated that we don't police them. The issue of this last employee was forwarded to us saying "look what somebody is saying".

Dr. Woodson stated that on page four at the top under "monitoring" it says that "the PIO shall closely monitor social media he/she will view agency social networking pages at least once each weekday and periodically on weekends." That refers to the health department's pages not employee's pages. Shannon has the pages linked to her phone and monitors them on the weekend. If she is unable to do so, it goes through the PIO succession plan which would be Greg Moore, and so on. There is a PIO back up.

Dr. Woodson, on page 3, under content management "only content related to agency programs". So many of the things we do have come through ODH or CDC. Would that be included in this? Shannon stated that it is. This refers to items coming from our department, not items from outside. This policy is saying that items should not be posted that are not relevant to the health department and our programs.

Under "branding" it mentions the Visual Style Guide & Branding Practices standard. This document is located in both Shannon Land's office and on the "G" drive. The location will be added to this document.

(Resolution 2017.112) A motion was made by Robert Reinbolt and seconded by Perlean Griffin to approve the Social Media Policy as corrected per above discussion. 8 yeas, 0 nays. Motion Carried.

Committee Reports

A. Audit/Finance Committee Report

- a. Ted Kaczorowski stated that the Audit/Finance Committee met on Tuesday, August 22, 2017. The review of the audit was done at that meeting. The preliminary report will be forthcoming. The review of the financial status report for the month of July shows that we are moving forward.
- b. The bill schedule was reviewed. Nothing out of the ordinary needed to be addressed.
- c. There are 15 pending grants applications:
 - i. Household Sewage Treatment Repair/Replacement grant application for \$200,000.
 - ii. Dental Sealant Program grant application for \$59,983, grant period from January 1, 2018 through December 31, 2018.
 - iii. Maternal and Child Health Program grant application for \$330,584, grant period from October 1, 2017 through September 30, 2018.
 - iv. Sexually Transmitted Diseases grant application for \$49,568, grant period from January 1, 2018 through December 31, 2018.
 - v. Women, Infants & Children grant application for \$2,400,326, grant period from October 1, 2017 through September 30, 2018.
 - vi. Minority Health Month grant application for \$2,500, grant period from April 1, 2018 through April 30, 2018.
 - vii. HIV Prevention grant application for \$285,039, grant period from January 1, 2018 through December 31, 2018.
 - viii. Creating Healthy Communities grant application for \$135,000, grant period from January 1, 2018 through December 31, 2018.
 - ix. Accountable Health Communities (AHC) grant application for \$14,113, grant period from April 1, 2017 through March 31, 2022.
 - x. Access Increase in Mental Health and Substance Abuse Services (AIMS) Supplemental Funding grant application for \$150,000, grant period from September 1, 2017 through August 31, 2018.
 - xi. Empowered Communities for a Healthier Nation Initiative grant application for \$350,000, grant period from September 30, 2017 through October 1, 2018.
 - xii. WK Kellogg Foundation: Eat Fresh Live Well grant application for \$524,000, grant period from December 1, 2017 through November 30, 2021.
 - xiii. Lead Poisoning Awareness Community Mini Grant application for \$5,000, grant period from September 1, 2017 through November 30, 2017.
 - xiv. Community Cessation Initiative grant application for \$320,951, grant period from November 1, 2017 through October 30, 2018.
 - xv. Supportive Pregnancy Care grant application for \$5,000, grant period from May 1, 2017 through June 30, 2018.

Dr. Ross asked if there are any of these that we are worried about not getting. Ted Kaczorowski stated that there are always a few you have to questions about cutbacks that may be

coming out of Washington. We received \$85,000 from the Health Center Quality Improvement Supplemental funding that was a pleasant surprise. There was one grant we did not receive. Some are very competitive that we do not get.

- d. There are 6 contracts in the month of August 2017:
- i. Ohio March of Dimes is a review contract for \$5, 000 to recruit at least 40 prenatal patients to participate in Supportive Pregnancy Care. Contract period is from May 1, 2017 through June 30, 2018.
 - ii. Compliancy Group, LLC is a disbursement contract to guide TLCHD staff through all six required HIPAA Compliance security risk assessments. Contract period is for 12 months.
 - iii. Mental Health and Recovery Services Board of Lucas County is a revenue contract for \$20,000 to purchase supplies for the syringe access program.
 - iv. Karen H. Willard, RPh is a disbursement contract for \$40.17 per hour not to exceed 24 hours per week for temporary employment as a part-time Pharmacist. Contract period is from August 28, 2017 through December 31, 2017.
 - v. Adell Shehab, RPh is a disbursement contract for \$40.17 per hour not to exceed 24 hours per week for temporary employment as a part-time Pharmacist. Contract period is from August 28, 2017 through December 31, 2017.
 - vi. Joseph R. Klep is a disbursement contract for \$9,525 to provide consulting services concerning matters of Ohio public employee employment relations, classification review of manager positions, classification plan, and training presentations and materials. Contract periods is from June 26, 2017 through August 31, 2017

In regards to items iv & v, currently our Pharmacist is on medical leave so we have issued contracts with Karen Willard and Adell Shehab to cover that position

Other Items – Transfers of Appropriations/Revenue Estimates and Expense Appropriations

A transfer reallocates funds from one cost object to another. Board of Health Resolution is required to approve Transfers of Appropriations performed in the month of July 2017 in the ordinary course of business. Total transfer is \$37,750.95 consisting of changes in various expense categories.

(Resolution 2017.08.113) A motion was made by Perlean Griffin and seconded by Don Murray to approve the Transfer of Appropriations for the month of July in the amount of \$37,750.95. 7 yeas, 0 nays. Motion Carried.

A Board of Health Resolution is required to approve changes in Revenue Estimates and Expense Appropriations for the month of July 2017 in the amount of \$242,287.53. This represents new revenue estimate and appropriation for the Minority Health Grant, Tobacco Prevention, ODH Prescription Drug Overdose, and a decrease of revenue estimate and appropriation for Health Start Year 3.

(Resolution 2017.08.114) A motion was made by Barbara Conover seconded by Robert Reinbolt to approve the Revenue Estimates and Expense Appropriations for the month of Julye in the amount of \$242,287.53. 7 yeas, 0 nays. Motion carried.

FQHC Report and Clinic Activity Reports

The clinic receipts were 233,635.26 and expenses were \$348,920.60. July 2017 net loss was \$115,285.34. This was discussed in the committee meeting and a lot of it had to do with the billing situation and how funds move.

Eric asked Tina Stokes and Clarence Coleman to look at every clinic's revenue and expenditures and have a report for next month.

(Resolution 2017.08.115) A motion was made by Robert Reinbolt and seconded by Perlean Griffin to approve the Audit/Finance Report. 7 yeas, 0 nays. Motion carried.

B. Personnel Committee

The personnel committee met on Tuesday, August 22, 2017.

- 1) Perlean Griffin stated that the Personnel Committee is requesting the approval of two positions.
 - a. Assistant Director of Environmental Health and Community Services. The job description was previously emailed to the Board Members and is also in the packet. The intent is that this position will be filled by Samantha Eitnrear.
A motion was made by Donald Murray and seconded by Ted Kaczorowski to approve the position of Assistant Director of Environmental Health and Community Services. 8 yeas, 0 nays. Motion Carried.
 - b. The committee is asking for approval of the position of Supervisor of Fiscal Assurance. The job description is in the packet. This position job description was discussed in committee. This is a new full-time position.

(Resolution 2017.08.116) A motion was made by Robert Reinbolt and seconded by Ted Kaczorowski to approve the position of Supervisor of Fiscal Assurance. 8 yeas, 0 nays. Motion Carried.

- 2) The Committee seeks approval of the promotion of Shynell Jones, BSN to Supervisor of Maternal & Child Health. Shynell has been a nurse here at the health department and has a very good record of performance. She will be on probation for 45 days. She will be given some additional management training which will be documented. This is a grant funded, non-bargaining position. A mid-probation evaluation will also be completed.
(Resolution 2017.08.117) A motion was made by Robert Reinbolt and seconded by Ted Kaczorowski to promote Shynell Jones, BSN to Supervisor of Maternal & Child Health at the rate of \$32.32 per hour. 7 yeas, 0 nays. Motion carried.
- 3) The Committee seeks approval to hire a candidate for Sanitarian in the Lead Program. Latesha McDonald. This is a new full-time, bargaining unit position with a probation period of 60 days. A documented evaluation of her performance will take place during this time. This is funded from the \$90,000 from the City of Toledo for Lead. Rate of Pay is \$21.92.

(Resolution 2017.08.118) A motion was made by Ted Kaczorowski and seconded by Robert Reinbolt to approve the hiring of Latesha McDonald. 7 yeas, 0 nays. Motion carried.

- 4) The Committee seeks approval to hire a candidate for Dental Hygienist.
A motion was made by Ted Kaczorowski and seconded by Robert Reinbolt to approve the hiring. 7 yeas, 0 nays. Motion carried.

- 5) The Committee seeks approval to post a position for a Health Educator to replace Samantha Brown. This is 100% grant position part of the Healthy Start Grant. We are in year 4 of 4 for this grant and will be in a competitive grant status next year.

(Resolution 2017.08.119) A motion was made by Robert Reinbolt and seconded by Ted Kaczorowski to approve posting of the Health Educator position. 7 yeas, 0 nays. Motion carried.

- 6) The Committee is seeking approval of the Mobile Vision Program Plan. Kelly Burkholder-Allen reported that Mike Allison, Program Coordinator for the Mobile Vision Program has resigned. He has been with the program since the onset and has established a very firm foundation and infrastructure for the program. With his departure, we have had an opportunity for a trial run without a coordinator while he was on an FMLA leave for some time earlier this year. It was found that with the infrastructure pieces being solid and already built, there is no need to have the coordinator position filled. What is needed is to increase clinical time and opportunities. There are currently two part-time opticians in the program. It is being proposed to increase the hours for one of these positions from a 25 hour a week to a 40 hour full-time position. This would include additional responsibilities which were previously part of Mr. Allison's duties. The employee who would increase hours is Kristin Moncrief. She began working here in December, 2016 with a many year background in the private sector working as an optician. She has brought many new activities to the program.

Also recommend for consideration is an increase of 50 cents per hour for each of the opticians. Their pay is currently below market rate and they are incredibly dedicated. This would demonstrate our commitment to their value and contribution to the program. This cost will be offset by the departure of Mr. Allison. There will also be a significant cost saving to the health department. In addition, we will be able to repurpose or sell the mobile vision van. We have become a lot more mobile and there is a great opportunity for cost savings.

Dr. Woodson asked why we would sell the van since it is a mobile vision program. Kelly Burkholder-Allen explained that we have been able to streamline the equipment using mobile equipment that is handheld. We have also received a grant for the Healthy Eye, Healthy Children program and we will be buying a hand held-held split-lamp so we are able to contain the program in two of those cloth wagons instead of a very large split lamp.

Dr. Ross asked about the use of the employee's personal vehicles. Eric explained that a large number of our employees use their own vehicles and are reimbursed mileage. Carrying the equipment in their vehicles is a concern and they will have to follow strict policy and procedure that we have set forth for carrying agency equipment.

(Resolution 2017.08.120) A motion was made by Robert Reinbolt and seconded by Barbara Conover to approve the Mobile Vision Plan as outlined above. 7 yeas, 0 nays. Motion Carried.

- 7) The Committee is seeking approval of contracts for two temporary Pharmacists. The contracts have been reviewed by our legal counsel. The two Pharmacists are Adell Shehab, RPh and Karen H Willard, RPh. These contracts are for temporary staffing to cover for our pharmacist who is currentl on FMLA. In addition, they will cover for other time off in the future. Mr. Shehab has worked for the agency in the past covering vacation time.

Mr. Reinbolt asked about the Termination Clause on page 2, section 4. Either party can terminate employment with written notice to the other party. This does not have a time frame for termination.

After much discussion it was decided that these contracts will be updated on an annual basis to have the staffing available when needed when or Pharmacist, Evelyn Schreier is off duty. The agreement will be left as is at this time with no time frame.

(Resolution 2017.08.121) A motion was made by Barbara Conover and seconded by Ted Kaczorowski to approve the Temporary Pharmacist positions. 7 yeas, 0 Nays.

- 8) The Committee is seeking for a motion to allow the Health Commissioner to hire a supervisor for Environmental Health to replace Jerry Bingham who has resigned. This would occur prior to the next Board of Health meeting. This would provide the opportunity to have a new supervisor in place and have time with the out-going supervisor for a few of days to get up to speed. This would be a great on-boarding process.

Perlean Griffin stated that there was no need for a motion since this authority has already been granted by the Board.

Confirmation of New/Separated Employees:

Newly Hired:

Courtney Stewart as a Social Worker in the Syringe Program. Date of Hire was 7/10/17 at a rate of \$22.29. This position is funded 100% by a grant from UPMC-Ryan White.

Separated Employees:

Zyishia Bailey, Supervisor of Maternal and Child Health, Voluntary Resignation on 7/19/17.

Joanne Melamed, Director of Administrative Services, Voluntary Resignation on 8/4/17

Michael Allison, Vision Program Coordinator Voluntary Resignation, 7/1/17

Jerry Bingham, Supervisor of Environmental Health, Voluntary Resignation on 9/15/17

(Resolution 2017.08.122) A motion was made by Ted Kaczorowski and seconded by Barbara Conover to accept the Separation Agreement for Joanne Melamed. Roll Call vote was taken. 6 yeas, 1 nay. Motion carried.

(Resolution 2017.08.123) A motion was made by Don Murray and seconded by Robert Reinbolt to accept that Settlement agreement with Greg Moore. 7 yeas, 0 nays. Motion carried.

(Resolution 2017.08.124) A motion was made by Robert Reinbolt and seconded by Don Murray to accept the Settlement Agreement for Samantha Eitniet. 7 yeas, 0 nays. Motion carried.

(Resolution 2017.08.125) A motion was made by Ted Kaczorowski and seconded by Robert Reinbolt to accept the Personnel Committee Report as presented. 7 yeas, 0 nays. Motion carried.

C. Environmental Health Committee Report

The committee met on August 16, 2017.

- a. There was a request for a variance at 4944 Trellis Way in Sylvania Township. This is a 40' lot that needs a septic system replacement. The area that can be utilized requires a 5'

variance from the property line to the edge of the new system and from the driveway over. It is the recommendation of the Environmental Health Committee to grant the variance on 5' on each side. This is the old section of Sylvania Township and we expect that we will be having more of these requests in the future due to the age of the systems. There are not storm sewers in this area.

(Resolution 2017.08.126) A motion was made by Robert Reinbolt and seconded by Perlean Griffin to approve this variance. 7 yeas, 0 nays. Motion carried.

- b. There was a variance request from July that was based on the compliance of the property owner at 326 Wynn Road in Oregon. There was the issue of a swimming pool patio over top of the field. That has been complied with and this is considered to be an update.
- c. The Draft Water System rules were received a few days ago. The committee will be meeting on September 6, 2017 to discuss the draft plan and make any comments. The committee will review prior to the deadline to respond with comments on the proposed rule change. We will have the regular Environmental Health Committee meeting if there is a need to do so on the 3rd Wednesday of the month. These draft rules came from ODH and was received on short notice.
- d. The Ohio EPA released next year's application for the repair and replacement grant, which we saw in the Audit/ Finance Report. This is in the amount of \$200,000 for which we have made application.
- e. A Lead Coalition has begun to meet again. This will be a meeting with Landlord, Real Estate Partners, and Neighborhood Properties. The coalition will be broken down into two groups. The community groups are one and the Landlords/Property Managers is the other group. We met with both groups. We are looking at ways to reach out to more landlords since there are only about 340 registered properties. Additional meetings are planned.
- f. Eric Zgodzinski discussed the issue of people having their dogs on restaurant patios. We do not know how the Board wants to address this. Eric stated that he is taking it as the current Ohio Revised Code stated that you are not allowed to have a dog inside the premises. There are a number of exceptions (e.g. service dogs). There are zoonotic issues with the dogs. This will become a much bigger issue in the near future. Patios are part of the food service. Currently it is against the code and we need to decide how we are going address this issue. There will be more to come on this issue.

(Resolution 2017.08.127) A motion was made by Ted Kaczorowski and seconded by Dr. Ross to accept the Environmental Health Committee report as presented. 7 yeas, 0 nays. Motion Carried.

D. Facility Committee Report

- a. Committee did not meet – no report

E. Co-Applicant Committee

- a. The Committee met and discussed current financial conditions of the clinic. Focused in on the percentage of collections. We are still short of our percentage goal. There was discussion about the organization of the clinics. There will be more to come of that. Dr. Woodson stated that although we are only required to have the meetings every 6 - 12 months, we are having them every month. This has been a good thing to get together and communicate more often. Dr. Dake has been chairing the meetings. He interviewed several employees a few weeks ago. Nancy Schott-Brown met with staff at the Western

Lucas County Clinic. They have discussed issues with the phone system and how it is being handled. Shannon Lands addressed this issue right away. This committee meets on the third Tuesday of each month at 4:00 PM

F. Legislative Committee

- a. Committee did not meet – no report

(Robert Reinbolt left meeting at 11:38 AM)

Pending Business

A. FQHC Update

Health Center Key Accomplishments:

- a. The \$85,138 grant that was reported in the Audit/Finance Committee report is a Quality Improvement grant supplement to be used to build on the 2016 achievements. It demonstrates notable improvement in one or more clinical quality measures between 2015 and 2016, namely increasing the total number of patients, improving cost efficient care, and making advances in moving each race/ethnic group towards the Health People 2020 goals.
- b. The 2017 Access Increases in Mental Health and Substance Abuse Services (AIMS) funding of \$75,000 for the new position of LISW and \$75,000 for IT upgrades and changes. An MOU is signed with Family Services of NWO for mental health services at both Health Center sites.
- c. On July 23, 2017, the Health Department received its Certificate of Compliance for meeting all CLIA regulations. John Pluto, Medical Technologist, is to be congratulated for his efforts towards the Laboratory Recertification.
- d. The Dental Clinic held a Back to School Walk-in Clinic for children 6 and under. Seventy-two children were seen at that clinic.
- e. Dental Sealant Grant charges in the amount to of \$35, 000 were submitted for the 14 month grant award.

Current Challenges/Concerns:

- a. Health Center Board President was interviewed by the Task Force on 8/16/17
- b. Increasing billing income
- c. Increasing patient encounters per hour
- d. Mobile Dental and Vision start-up at schools.

Scope of Project

- There were 1707 encounters in July. Total encounters (including shots) for 2017 is 14,427. An encounter is a visit that we billed \$140 for.
- Upcoming CIS Submissions – none
- Forms 5A, 5B and 5C which are services/service delivery methods were corrected and updated.

QI/QA activities

- The depression screening measure has increased to 43.7%. This screening will be modified in September to reflect best practices.
- Child Weight assessment and Counseling has increased up to 45.8% which is a significant increase from previous months.

FQHC Board information:

- One of our FQHC Board members who is a patient has passed away in August.

Performance Measures

- Looking at the FluFit measure. This is geared to increase the number of screening for Colorectal Cancer. You get your flu shot and also a colorectal screening kit. It has been successful in other areas.

Flu Clinic schedule was distributed. The cost is \$30 for the vaccination of the Quadrivalent.

Dr. Woodson stated that in regards to the depression screening, more and more money is being directed to this. There will be more information next month when the Community Health Assessment report is released.

(Barbara Conover left meeting at 11:55 AM)

B. Division Reports

a. Environmental and Community Health

- i. Dave Welch reported in regards to Lead Program: One of the ideas that came out was in the issuing date of the Certificate. Right now we make the issuance date of the certificate which is the day we get the information. If we make it on the deadline date of June 30, 2018 it might bring more landlords in. Some of them are waiting. This will be presented at today's City Council Meeting. The issuance date would be June 18, 2018. We only have 349 of 13,000 in so far and this may help get more people in and registered. Wanted to make sure the Board was aware of this.

b. Health Promotion/Policy Integration

- i. Lindsey Rodenhauser, Tobacco Coordinator, reported that a couple of months ago we started working with the University of Toledo faculty and students to gain support on Tobacco -- 21. This is an initiative to raise the age to obtain tobacco and tobacco paraphernalia to 21 years of age. We know in Lucas County 22% of youth have tried tobacco products. 54% of those youth have obtained the tobacco from someone 18 or older. One out of 7 adults smoke. We are trying to reduce that number. One way to do that is to raise the age. In New York City they have done this. They had rates of about 7% of youth. After putting this in effect in 2014 they did another study. In 2015 the rate dropped down to 5% in cigarette use. It was a little lower for chewing tobacco and cigars. We could affect about 90% of the youth. Five states have made this a state law. These are California, Oregon, Maine, New Jersey and Hawaii. In Ohio, eight cities have done it. The two largest are Columbus and Cleveland. What we have heard from ODH and the state level is that they are waiting on Toledo to pass this in order to then put it into a state law. We need to support and act now. We have learned from talking to the other municipalities surrounding Toledo is that they too are waiting on Toledo. They feel if Toledo will pass it then Maumee, Oregon, and Sylvania will. In talking with Eric, we want to make it a county-wide initiative and work or way up. We want to model what Columbus has done. How they do it is to use the Board of Health and Health Department as enforcement. They created standardized signage so all the signs look the same. They have created a local Tobacco license and have a license fee.

Depending on the city, the fees range from \$100 - \$200. Columbus has a fee of \$150. Based on all the facilities that we have there are 483 locations in Lucas County with 350 of them in the City of Toledo. If we charged \$100 with would be \$48,000, \$150 would be \$72,450 at \$200 it would be \$96,600.

Eric asked if there was a reduction in long term smokers. Lindsey stated that she did not have that information. Because it is so new, in New York City we don't know as far as long term. We do know that individuals who are 21 years or older are less likely to smoke. If we don't allow them to smoke until after they are 21 there is a better chance for them not to smoke. The question was ask if this includes the smoking of marijuana. Lindsey stated that this involves tobacco products (cigarette, little cigars, cigarillos, e-cigarette, rolling paper, and pipes). This would include events. A special license would be needed to for any event where the sale of these products would be going on.

We are still in the infancy stage of planning. There are questions as to if we go with just Toledo to start or the whole county. There will be more to come on this. Anything we can do to reduce the rate of smoking will be beneficial and it attacks all of Strategic Priorities in the Strategic Plan.

Dr. Ross said that if we are tackling the tobacco and not the marijuana, is there any evidence that the kids are being turned off of the tobacco and start smoking marijuana instead. Lindsey said that she has not seen any data. Dr. Woodson stated that the European Journal of Preventive Cardiology has seen from studies that marijuana may be a cause of hypertension. It will take more time to get more data.

Shannon stated that the PowerPoint presentation is in the packets for further review. Lindsey is attempting to get on the Toledo City Council agenda. A handful of Council people are in support of this. We need to get encourage them of the importance of this initiative.

c. Health Services

- i. The monthly report is in the packets. One thing that was presented was a photo of a dress presented during Pride Week which brought many people to the booth. The dress was adorned with condoms. Over 4000 condoms were handed out. The staff talked about PREP, Syringe Access, Testing for HIV and Hep C and STD Prevention.

d. Administrative Services

- i. Nothing further.

Health Commissioner's Comments

- Eric Zgodzinski reported that in the packet there is an update on the recent norovirus situation at Mama C's doughnut shop in Maumee. The interesting thing is how many jurisdictions were affected by Mama C's and the Noro Outbreak. Indiana, Massachusetts, New York, Missouri and Kansas were linked back to this occurrence.

- Eric reported that he has been accepted to the FBI Citizens Academy of Toledo. This is a six week program on Thursday evenings for three hours. They are asking for leaders in the community to participate. It talks about the FBI and what they do in the community. Approximately 150 – 200 apply they accept less than 50 for the academy.

Other Items and Public Health in the News

- Dr. Woodson reported that she had asked to know when Eric has represented our health department in the news. Shannon prepared a report of these. Media interviews: 87, some of them very extensive such as the Sunday morning shows, Community meetings: 36.
- Don Murray asked that this information be sent to the DAC and include the PIO information that happens on the weekend and after hours that is done on a daily basis.

Adjournment

(Resolution 2017.08.128) A motion to adjourn was made at by Donald Murray and seconded by Ted Kaczorowski 12:02PM. Motion carried.

Next Meeting Dates: **September 28, 2017**
 October 26, 2017
 November 16, 2017

Signed:



Dr. Donna A. Woodson, President
Lucas County Regional Health District Board

Attested By:



Eric J. Zgodzinski, MPH, RS, CPH
Secretary to the Board