

# **ALAMANCE COUNTY BOARD OF HEALTH**

## **Minutes**

### **Regular Meeting of the Board of Health**

**December 15, 2009**

The Alamance County Board of Health met at 6:30 p.m. on Tuesday, December 15, 2009, in the Professional Board Room of the Human Services Center located at 319-B North Graham-Hopedale Road, Burlington, North Carolina.

The following board members were present: Mr. Jim Gooch, Chairman, Dr. Michael Blocker, Dr. Donald Courtney, Ms. Lynda Puckett, Mr. Charles Wilson and Dr. Reid Woodard, Vice-Chairman.

The following staff members were present: Mr. Barry Bass, Mr. Carl Carroll, Dr. Kathleen Shapley-Quinn, Ms. Debra Garrett, Ms. Christy Bradsher, Ms. Michele Herbek, Mr. Eric Nickens, Ms. Becky Perkins, Ms. Shannon Alley, Ms. Sabra Meadows and Ms. Janna Elliott.

The following guests were present: Ms. Lucy Kernodle and spouse; Mr. David Leonard.

#### **I. Call to Order and Introductions**

Mr. James Gooch, Chairman, called the meeting to order at 6:50 pm.

#### **II. Awards and Recognition**

Mr. Gooch presented the 2009 Employee of the Year Award to Ms. Shannon Alley, Preparedness Coordinator.

Mr. Gooch presented a 2009 Public Health Partnership Award to the Alamance County Office of Emergency Management, represented by Fire Marshal David Leonard.

Mr. Gooch presented another 2009 Public Health Partnership Award to Ms. Lucy Kernodle.

Mr. Gooch presented Ms. Sabra Meadows, WIC Processing Assistant IV, with a plaque recognizing and thanking her for 26 years of service. Ms. Meadows is retiring on December 31, 2009, and board members applauded her for her service to Alamance County and the Health Department.

Mr. Barry Bass recognized Mr. James Gooch for his nine years of service as member, two years as Vice-Chairman, and one year as Chairman of the Board of Health. Mr. Gooch's term will expire December 31, 2009.

### III. Approval of the October 20, 2009, Board of Health Minutes

***A motion was made by Mr. Charles Wilson to approve the October 20, 2009, Board of Health minutes. The motion was seconded by Ms. Lynda Puckett and approved unanimously by the board.***

### IV. Public Comment

No one from the public signed up to make any comments.

### V. Administrative Report

#### A. Personnel Update

Ms. Janna Elliott provided the board with the following Personnel Update:

December 15, 2009

#### PERSONNEL UPDATE

##### *New Hires / Transfers / Resignations:*

- Nekaya Harrelson transferred into Public Health Nurse II – Women’s Health Coordinator, replacing Kathleen Grasty, on December 1, 2009
- Michelle Stovall began employment as Processing Assistant III – WIC Lab, replacing Pamela Herring, on December 8, 2009
- Sabra Meadows, Processing Assistant IV – WIC, is retiring effective December 31, 2009

##### *Recruiting to fill the following positions:*

- Public Health Nurse I, replacing Nekaya Harrelson
- Public Health Nurse II – Post Partum Home Visit, replacing Teresa Rogers
- Dental Hygienist (50%), replacing Vicki McPherson
- Dentist I (50%), replacing Roberta Osborn
- Nutritionist III – WIC (newly established position)
- Processing Assistant IV – WIC, replacing Sabra Meadows
- Processing Assistant III – WIC (newly established position)

##### *The following positions have been frozen:*

- Physician Extender II, replacing Rebecca Owens (frozen until January 1, 2010)
- Environmental Health Specialist, replacing Tonya Randell (frozen until January 1, 2010)

**B. Budget Amendments/Transfers**

Ms. Bradsher presented the Health, WIC and Dental amendments and transfers 6 - 14 for the 2009 - 2010 fiscal year for board approval:

<b>Budget Amendments and Transfers FYE 10</b>				
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REV. NO.	6		DEPT. NAME:	WIC
STATE BUDGET:	WIC Program		TRANSFER:	X
			AMENDMENT:	
<b>Expenditures:</b>				
110-5150-239	Scientific Medical Supplies	-4,500.00	-4,500.00	-4,500.00
110-5150-443	Computer Lease-From 239	4,500.00	4,500.00	4,500.00
<b>Explanation:</b>	Transferred funds to lease three computers for the WIC department			
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REV. NO.	7		DEPT. NAME:	Health
STATE BUDGET:	Preparedness Section		TRANSFER:	
			AMENDMENT:	X
<b>Expenditures:</b>				
110-5110-624	Pandemic Flu Phase III (Implementation)	301,601.00	301,601.00	301,601.00
<b>Revenue:</b>				
310-3511-322	Pandemic Flu Grant	301,601.00	301,601.00	301,601.00
<b>Explanation:</b>	Implementation of mass H1N1 vaccination campaign			
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REV. NO.	8		DEPT. NAME:	Health
STATE BUDGET:	Aid-To-County		TRANSFER:	
			AMENDMENT:	X
<b>Expenditures:</b>				
110-5110-239	Medical Scientific Supplies	60,938.00	60,938.00	60,938.00
110-5110-260	Departmental Supplies & Materials	5,000.00	5,000.00	5,000.00
<b>Revenue:</b>				
310-3511-301	Aid-To-County	65,938.00	65,938.00	65,938.00
<b>Explanation:</b>	Additional Aid-To-County Funds from N.C Division of Public Health			
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REV. NO.	9		DEPT. NAME:	WIC
STATE BUDGET:	WIC		TRANSFER:	
			AMENDMENT:	X
<b>Expenditures:</b>				
110-5150-120	Salaries & Wages	43,375.00	43,375.00	43,375.00
110-5150-180	Insurance,FICA,Retirement	23,355.00	23,355.00	23,355.00
<b>Revenue:</b>				
310-3515-300	WIC Program	66,730.00	66,730.00	66,730.00
<b>Explanation:</b>	Additional funds received due to increase in current WIC caseload.			
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REV. NO.	10		DEPT. NAME:	Health
STATE BUDGET:	Women's & Childrens Branch		TRANSFER:	
			AMENDMENT:	X
<b>Expenditures:</b>				
110-5110-644	Temporary Assistance for Needy Families (TANF)	14,624.00	14,624.00	14,624.00
<b>Revenue:</b>				
310-3511-309	Women's Health Services	14,624.00	14,624.00	14,624.00
<b>Explanation:</b>	Contraception Methods			
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REV. NO.	11		DEPT. NAME:	Health
STATE BUDGET:	Environmental Health		TRANSFER:	

<b>Budget Amendments and Transfers FYE 10</b>					
				AMENDMENT:	X
<b>Expenditures:</b>					
110-5110-120	Salaries & Wages	3,420.00	3,420.00	3,420.00	
1110-5110-180	Insurance,FICA,Retirement	1,397.00	1,397.00	1,397.00	
<b>Revenue:</b>					
310-3511-319	Environmental Health	4,817.00	4,817.00	4,817.00	
<b>Explanation:</b> Reimbursement for cost of inspections completed for the Summer Food Services Program.					
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET	
REV. NO.	12		DEPT. NAME:	Health	
STATE BUDGET:	Immunizations		TRANSFER:		
				AMENDMENT:	X
<b>Expenditures:</b>					
110-5110-241	Supplies-Small Tools, Equipment	7,000.00	7,000.00	7,000.00	
<b>Revenue:</b>					
310-3511-325	Immunization Grant	7,000.00	7,000.00	7,000.00	
<b>Explanation:</b> Improve Immunization Capacity					
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET	
REV. NO.	13		DEPT. NAME:	Health	
STATE BUDGET:	Tobacco Prevention & Control Section		TRANSFER:		
				AMENDMENT:	X
<b>Expenditures:</b>					
110-5110-TBA	Smoke Free Law	3,684.00	3,684.00	3,684.00	
<b>Revenue:</b>					
310-3511-TBA	Smoke Free Law Grant	3,684.00	3,684.00	3,684.00	
<b>Explanation:</b> Implementation and enforcement of House Bill 2, Effective January 1, 2010.					
ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET	
REV. NO.	14		DEPT. NAME:	Health	
STATE BUDGET:	Chronic Disease & Injury		TRANSFER:		
				AMENDMENT:	X
<b>Expenditures:</b>					
110-5110-TBA	Asthma Grant	5,200.00	5,200.00	5,200.00	
<b>Revenue:</b>					
310-3511-TBA	Asthma Grant	5,200.00	5,200.00	5,200.00	
<b>Explanation:</b> Asthma education, awareness, and administration fo asthma-related activities.					

***A motion was made by Dr. Michael Blocker to approve the Health, WIC and Dental budget amendments and transfers 6 - 14 for FY2009-10. The motion was seconded by Dr. Reid Woodard and was approved by the board unanimously.***

**VI. Personal Health Committee Update**

Dr. Reid Woodard, Chairman of the Personal Health Committee, presented the minutes from the November 17, 2009, Personal Health Committee meeting.

**Alamance County Board of Health****Personal Health Committee**

The Personal Health Committee met on Tuesday, November 17, 2009, at 6:00 pm, in the Health Department Conference Room (Room 1129) of the Human Services Building located at 319-B N. Graham Hopedale Rd, Burlington, North Carolina.

The following committee members were present: Personal Health Committee Chairman Dr. Reid Woodard, Mr. Charles Wilson, Ms. Lynda Puckett and Dr. Michael Blocker.

The following staff members were present: Mr. Barry Bass, Dr. Kathleen Shapley-Quinn, Ms. Debra Garrett, Ms. Michele Herbek and Ms. Janna Elliott.

The following guest was present: Ms. Neill Frantz.

**Call to Order**

Chairman Reid Woodard called the meeting to order at 6:06 pm.

Mr. Barry Bass introduced Ms. Neill Frantz. Ms. Frantz is a senior at Elon University in the Human Services program. She is working on a 30 hour internship with ACHD. The committee welcomed Ms. Franz.

**WIC Update**

Ms. Michele Herbek informed the committee that beginning in December and continuing through February 2010, WIC will be offering late clinic several nights each week. This is a temporary measure for the corrective action plan so that they will be able to see clients within the time period specified by the state. Overtime will be paid to the WIC employees who work the late clinics.

Ms. Herbek discussed that currently the show rate for client appointments is 74%. She anticipates this to increase in the coming months. Effective January 1, 2010, clients arriving later than 15 minutes after their scheduled appointment time will be rescheduled, unless there is another no-show. Also, they will allow walk-in clients to wait in the waiting area for a potential no-show or cancellation.

Ms. Herbek reported that the new WIC packages rolled out October 1, 2009. That has been fairly well received. One of the Nutritionists is displaying currently grocery flyers on a bulletin board in the WIC area with the approved foods being highlighted. Healthy snacks created from WIC approved foods were provided to children during Halloween week.

Ms. Herbek stated that the breastfeeding coordinator had recently attended a course in Chapel Hill. She also stated that she conducted an in-service to staff on soy foods.

Ms. Herbek provided the committee with the following WIC Report:

Minutes

2

November 17, 2009

WIC

## Departmental Monthly Report

August 2009

## Clinic Activities:

715 Clinical Nutrition contacts provided by Nutritionist

428 Hemoglobin's done in WIC

442 Nutrition Education lessons provided by WIC Clerical

Most recent report of dollar amount of WIC vouchers redeemed in Alamance County 392,824.76.

Number Food Vouchers redeemed – 12,716 July

Clinic show rate-71% ( 666 appointments kept/929 appointments scheduled)

Clinic profile: 4545 or 106% of assigned caseload 4291

Racial Ethnic composition of caseload- 39% White- Black 24% -38% Hispanic –  
<1% Asian.

Vendor Monitoring of 11 Stores

Vendor Training offered 4 stores accepted.

## Submitted by:

Robin Robertson

Clerical Supervisor

**Personal Health Update**

Ms. Debra Garrett reported that ACHD has been hosting H1N1 clinics throughout the county for more than a month. Two have taken place here; one at Fairchild and one in Mebane. ACHD has given more than 2,200 of the 8,000 doses given county-wide. So far, there have been no reports of problems with the vaccine. ACHD is hosting another clinic on November 20 at Fairchild for pregnant women and anyone age 25 – 64 years with a chronic medical condition. Ms. Garrett stated that we are targeting private schools this week. We are working with ABSS to provide vaccine at six mass clinics, one at each county high school. A mist only clinic will be held November 18 at Elon University for students and children of staff. Elon has 300 doses to be given. We are looking at locations to offer clinics in the Southern, Northern and Western parts of the county.

Minutes

3

November 17, 2009

The Mebane clinic was very successful, giving 558 doses in a three hour period. 280 of the county's first responders have been vaccinated. 415 doses have been reallocated to healthcare providers for staff.

**Medical Director's Report**

Dr. Shapley-Quinn gave the Alamance County Health Department Maternity Clinic Volume and Payment Source Statistics as well as Women's Health Clinic / Pregnancy Test / STD Monthly Report:

ACHD MATERNITY CLINIC VOLUME STATISTICS								
Month/Year	Total Pts	Total Visits	Closed Out	Hispanic Clients	% Of total	Asian Clients	% of total	UNC Clients
Jan-08	278		52	111	40%	---	---	74
Feb-08	272		46	120	44%	---	---	72
Mar-08	284		55	129	45%	---	---	66
Apr-08	278		50	128	46%	6	2%	68
May-08	283		57	139	49%	5	2%	68
Jun-08	296		46	142	48%	6	2%	68
Jul-08	303		53	139	46%	7	2%	154
Aug-08	302		66	130	43%	6	2%	76
Sep-08	301		58	122	41%	4	1%	73
Oct-08	** 262	515	pending	239	46%	9	2%	pending
Nov-08	** 246	419	pending	176	42%	4	1%	pending
Dec-08	** 261	528	pending	240	45%	6	1%	pending
					45%		2%	

\*\* Hispanic & Asian client information now reflects number of visits and not unduplicated numbers, percentage of total calculated using total visits

Month/Year	Total Pts	Total Visits	Hispanic Client Visits	% Of total	Asian Client Visits	% of total
Jan-09	250	460	200	43%	5	1%
Feb-09	268	477	220	46%	4	1%
Mar-09	273	522	216	41%	6	1%
Apr-09	274	495	245	49%	11	2%
May-09	263	461	229	50%	10	2%
Jun-09	266	511	258	50%	17	3%
Jul-09	253	507	250	49%	14	3%
Aug-09	247	446	217	49%	8	2%
Sep-09	255	462	217	47%	10	2%
Oct-09						
Nov-09						
Dec-09						
average/month						

\*\* Hispanic & Asian client information now reflects number of visits and not unduplicated numbers, percentage of total calculated using total visits





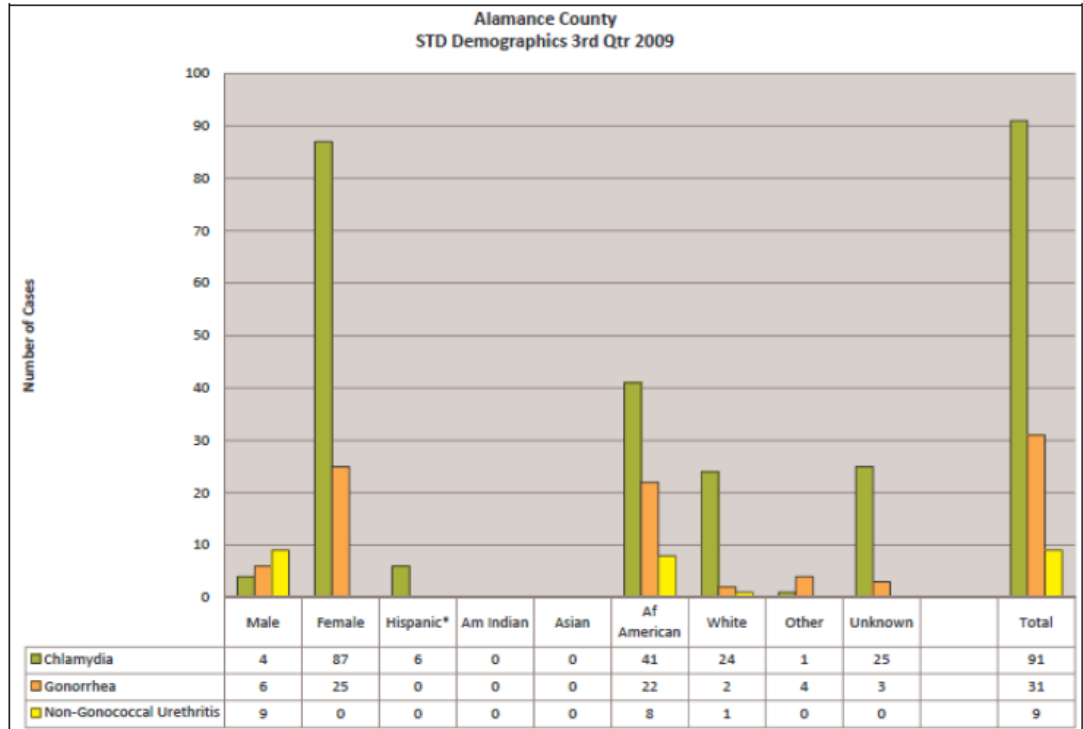


Minutes

5

November 17, 2009

Dr. Kathleen Shapley-Quinn discussed the Alamance County STD Demographics graph for the third quarter of 2009.



Mr. Barry Bass inquired about how receptive parents are to Gardasil, the vaccine for human papillomavirus (HPV). Dr. Shapley-Quinn stated that currently it is available for girls up to age 19 for free. It is a three series vaccine, so care should be taken that all three doses can be received before the 19<sup>th</sup> birthday. The cost at age 19 and up is \$150 per shot, or a total of \$450 for the series. Some insurance companies cover the cost or a portion.

Dr. Shapley-Quinn noted that there is a lot of influenza-like illness in the area, which is assumed to be H1N1. Dr. Blocker stated that the number of people on special isolation at ARMC is significant.

**Health Director’s Report**

Mr. Barry Bass reported to the committee that House Bill 2, the smoking in public places law, goes into effect at 12:00 am on January 2, 2010. All food service facilities will be required to display “no smoking” signs and remove ashtrays. Owners/managers will be required to direct individuals to stop smoking and handle such individuals as they would an unruly customer. Individuals found to be noncompliant may be issued a \$50 citation by law enforcement, not charged criminally. It will not be Environmental Health’s responsibility to remove customers in violation of the law. The law puts the responsibility on the owner or manager of the establishment. Any lodging

Minutes

6

November 17, 2009

establishment that serves food or drink of pay and is required to comply with state public health laws related to food and drink sanitation, must comply with the law. However, those establishments may designate up to 20% of their rooms as smoking and the rooms cannot be switched from smoking to non-smoking without extensive renovations. Smoking will not be allowed in bars, but cigar bars may qualify for an exception to the law. To qualify for the exception and allow smoking, the cigar bar must satisfy all of the following criteria: The bar must generate 60% or more of its quarterly gross revenue from the sale of alcoholic beverages and 25% or more from the sale of cigars. The bar will be required to submit quarterly revenue reports to the Department of Health and Human Services, Division of Public Health. The bar must have a humidor – which is a box or room with constant humidity designed to store cigars or pipe tobacco on the premises. The bar must not allow individuals under age 21 to enter. Smoke from the bar must not migrate from the bar to an enclosed area where smoking is prohibited under the state law, such as a restaurant. If the cigar bar begins operation after July 1, 2009, it must be located in a freestanding structure occupied solely by the bar. 60% of Alamance County's restaurants are already smoke-free. There is allowance for smoking in a non-enclosed area. An enclosed area has been defined as being enclosed on three sides with a roof or other overhead cover. Environmental Health staff has attended two webinars on how they can help to train facilities on the new House Bill 2 law. Private clubs and country clubs may qualify for an exception to the law; however there are specific guidelines for this. The private club must maintain selective members, must be operated by the members, must not provide food or lodging for pay to anyone who is not a member or a member's guest, and the club must either be incorporated as a nonprofit corporation or be exempt from paying federal income tax under federal Internal Revenue Code. If a restaurant or bar is out of compliance, and employee or member of the public may call the CARE-LINE at 1-800-662-7030, 7 a.m.-11 p.m., seven days a week. During other hours the caller can leave a message and their call will be returned. Information about complaints will be shared with the Local Health Director who has the responsibility for enforcement. The owner will get "three strikes" before incurring a \$200 per day fine for noncompliance.

Mr. Bass discussed the recent article in *The Times News* regarding biosolids or sludge. Alamance County, in conjunction with Orange and Chatham, is working to form a forum to research the application of biosolids. The state regulates controls on the use and application of biosolids.

Mr. Bass updated the committee about the situation discussed at the October 20 board meeting. The individual appealed to Mr. Carroll and then appealed further to Mr. Bass. If he appealed it further, it would go before the Board of Health, costing a minimum of \$90 in per diem cost alone. Mr. Bass emailed the board and received a majority of response in favor of refunding the individual \$50 paid for the permit fee.

Mr. Bass informed the committee that he issued an isolation order on a non-compliant tuberculosis patient today. The patient refused to sign the order, but that was noted on the order and the order was notarized. The patient did agree to be compliant with guidelines.

Minutes

7

November 17, 2009

Mr. Bass was pleased to report that ACHD has two new babies. Public Health Nursing Supervisor, Angela Osborne, had a baby girl on October 26. Licensed Clinical Social Worker, Aimee Vandemark, had a baby boy on November 16.

**Adjournment**

With no further business, the meeting adjourned at 6:55 pm.

**Respectfully submitted,  
Janna Elliott  
Clerk to the Board of Health**

## **VII. Personal Health Update**

Ms. Debra Garrett gave an H1N1 update. There are normally eight to ten screeners and eight to ten vaccinators using our nurses, physician assistant and nurse mid-wives. The first H1N1 clinic in coordination with Alamance-Burlington School System was held on December 12, 2009, at Western Alamance, Southern Alamance and Williams High Schools. Each site had eight ACHD employees, eight ABSS employees and some contracted Maxim nurses. More than 400 vaccinations were given at the three school locations. The state has lifted restrictions. ACHD is taking walk-ins, but no public clinics will be held until after the holidays due to staffing. More than 10,000 H1N1 vaccinations have been given in Alamance County. There has been a voluntary recall of 0.25 pre-filled Sanofi doses for children age six to 36 months. It is recalled because it is not as potent as recommended. There is no harm to anyone who received a dose of the recalled vaccination and the recommendation is to continue as planned with the second dose being administered at 30 days. ACHD did not receive any of the recalled vaccines.

Ms. Garrett reported that she has been with ACHD almost six months and has evaluated the clinic policies and flow. Ms. Garrett is ready to start making changes in clinic for patient efficiency. She will be looking at scheduling procedures and clinic flow issues to get patients to be seen by a provider as quickly as possible. Ms. Garrett thanked the board for supporting her during her time here, which has been a difficult time for everyone in public health.

Mr. Gooch inquired about the ability to charge an administration fee for the H1N1 vaccine. Ms. Garrett responded that the state will allow an administration fee, but ACHD elected not to charge the fee so as to try to vaccinate as many citizens as possible.

## **VIII. Environmental Health Committee Update**

Mr. Carl Carroll presented the minutes from the November 17, 2009, Environmental Health Committee meeting.

**Alamance County Board of Health**

**Environmental Health Committee**

The Environmental Health Committee met on Tuesday, November 17, 2009, at 12:00 pm in the Health Department Conference Room (Room 1129) of the Human Services Building located at 319-B N. Graham Hopedale Road, Burlington, North Carolina.

The following committee members were present: Dr. Donald Courtney, Mr. Chad Huffine and Mr. Michael Venable.

The following staff members were present: Mr. Barry Bass, Mr. Carl Carroll, Ms. Terri Craver and Ms. Janna Elliott.

**Call to Order**

Acting Chairman Donald Courtney called the meeting to order at 12:12 pm.

**House Bill 2 Update**

Mr. Carl Carroll reported to the committee that House Bill 2, the smoking in public places law, goes into effect at 12:00 am on January 2, 2010. All food service facilities will be required to display "no smoking" signs and remove ashtrays. Owners/managers will be required to direct individuals to stop smoking and handle such individuals as they would an unruly customer. Individuals found to be noncompliant may be issued a \$50 citation by law enforcement, not charged criminally. It will not be Environmental Health's responsibility to remove customers in violation of the law. The law puts the responsibility on the owner or manager of the establishment. Any lodging establishment that serves food or drink of pay and is required to comply with state public health laws related to food and drink sanitation, must comply with the law. However, those establishments may designate up to 20% of their rooms as smoking and the rooms cannot be switched from smoking to non-smoking without extensive renovations. Smoking will not be allowed in bars, but cigar bars may qualify for an exception to the law. To qualify for the exception and allow smoking, the cigar bar must satisfy all of the following criteria: The bar must generate 60% or more of its quarterly gross revenue from the sale of alcoholic beverages and 25% or more from the sale of cigars. The bar will be required to submit quarterly revenue reports to the Department of Health and Human Services, Division of Public Health. The bar must have a humidor – which is a box or room with constant humidity designed to store cigars or pipe tobacco on the premises. The bar must not allow individuals under age 21 to enter. Smoke from the bar must not migrate from the bar to an enclosed area where smoking is prohibited under the state law, such as a restaurant. If the cigar bar begins operation after July 1, 2009, it must be located in a freestanding structure occupied solely by the bar. 60% of Alamance County's restaurants are already smoke-free. There is allowance for smoking in a non-enclosed area. An enclosed area has been defined as being enclosed on three sides with a roof or other overhead cover. Environmental Health staff has attended two webinars on how they can help to train facilities on the new House Bill 2 law. Private clubs and country clubs may qualify for an exception to the law; however there are specific guidelines for this. The private club must maintain selective members, must be operated by the members, must not provide food or lodging for pay to anyone who is not a member or a member's guest, and the club must either be incorporated as a nonprofit corporation or be exempt from paying federal income tax under federal Internal



Minutes

2

November 17, 2009

Revenue Code. If a restaurant or bar is out of compliance, and employee or member of the public may call the CARE-LINE at 1-800-662-7030, 7 a.m.-11 p.m., seven days a week. During other hours the caller can leave a message and their call will be returned. Information about complaints will be shared with the Local Health Director who has the responsibility for enforcement. The owner will get "three strikes" before incurring a \$200 per day fine for noncompliance.

#### **Environmental Health Update**

Mr. Carroll informed the committee that Ms. Kelley Kimrey had submitted for and received a \$6,500 grant through the Asthma Coalition. This grant will fund additional outdoor air quality flags to be flown at all schools in the Alamance-Burlington School System. It will also be used to purchase "Love My Lungs" signs and air quality magnets that will be placed on all Environmental Health vehicles.

Mr. Carroll reported that the clerical staff person that was out of the office due to FMLA issues will return on a part-time basis on November 23.

Ms. Terri Craver reported that the turn-around time for onsite evaluations is two weeks or less. Environmental Health staff has kept busy by assisting with H1N1 vaccination clinics.

Dr. Courtney inquired if there are considerations for eliminating drive throughs to prevent idling, overuse of gas and even obesity. Mr. Carroll stated he had not heard of such discussion.

#### **Health Director's Update**

Mr. Bass discussed the recent article in *The Times News* regarding biosolids or sludge. Alamance County, in conjunction with Orange and Chatham, is working to form a forum to research the application of biosolids. The state regulates controls on the use and application of biosolids.

Mr. Bass commended staff for their efforts during this time of H1N1. It has been a frustrating process with vaccine trickling in. Nasal mist was the first to arrive and now we are beginning to receive injectable vaccine. An H1N1 clinic is scheduled for November 20 and will be open to 25 to 64 year olds with chronic medical conditions. We are working with ABSS administration to target the school system, where 8,000 – 10,000 students could be vaccinated. We are working with several private schools this week to vaccinate those students.

Mr. Bass updated the committee about the situation discussed during the October 20 board meeting. The individual appealed to Mr. Carroll and then appealed further to Mr. Bass. If he appealed it further, it would go before the Board of Health, costing a minimum of \$90 in per diem costs alone. Mr. Bass emailed the board and received a majority of response in favor of refunding the individual \$50 for the permit fee paid.

Minutes	3	November 17, 2009
<b><u>Adjournment</u></b> With no further business, the meeting adjourned at 12:49 pm.		
Respectfully submitted, Janna Elliott Clerk to the Board of Health		

## **IX. Environmental Health Update**

Mr. Carroll stated that all of the facilities that House Bill 2 will affect have been provided with educational materials. Also, ACHD's website has information about the new law as well as links to the state's website. Mr. Carroll stated that there are a little more than 300 facilities in Alamance County that are permitted by ACHD. According to the North Carolina Alcohol Beverage Control Commission website there are 67 bars in the county that are not food service facilities, but are subject to the law. Mr. Carroll stated that the first six months of implementation will likely receive the largest number of complaints.

## **X. Medical Director's Report**

Dr. Kathleen Shapley-Quinn informed the board that the *North Carolina Medical Journal*, September/October 2009 edition featured an article by Kimberly Alexander-Bratcher, MPH, on page 493, "Spotlight on the Safety Net: Alamance County Health Department." The article discusses ACHD's Teen Outreach Program (TOP), headed by Ms. Amanda Marvin, and the Health Education for You Ladies (HEY Ladies) Program, headed by Ms. Stacie Saunders, as well as other services ACHD offers to women of all years.

## Spotlight on the Safety Net

A Community Collaboration  
Kimberly Alexander-Bratcher, MPH

### Alamance County Health Department

The Alamance County Health Department is an accredited local health department that is implementing best practices and providing innovative programs to women across the reproductive health continuum. The leadership and staff of the department feel that emphasizing programs designed to provide services and support to women from adolescence through the reproductive years are among the organization's strengths. This *Spotlight on the Safety Net* describes the Alamance Teen Outreach Program (TOP), the Targeted Infant Mortality Reduction Grant (TIMR), and the women's health, mental health, and maternity services that are provided in the department.

The Alamance County Health Department has a unique partnership with the Alamance-Burlington School System and the Alamance County Juvenile Crime Prevention Council that supports adolescent health through implementation of the Teen Outreach Program. The Teen Outreach Program is a developmental intervention that attempts to help adolescents understand and evaluate their life options and helps them to develop a positive self-image, effective life management skills, and achievable goals, all of which are important in addressing preconceptional health issues among adolescent girls. The program is based on the notion that a heightened awareness of their family planning and reproductive options, increased knowledge about those options, and enhanced and diverse experiences with various life options will lead to a more positive outcomes including reducing unplanned teen pregnancy. The program is offered to high risk students in middle schools in the county. According to the *Alamance County Health Assessment 2007*,<sup>a</sup> the county averaged one teenage pregnancy per day in 2006. From the inception of the TOP program in 2003 to October 2007, less than 2% of participants have a reported pregnancy.<sup>b</sup> Since its inception in 2003, TOP has served 1,683 diverse participants (40% white, 30% African American, 21% Latino, 6% multiracial, 3% other; 50% male and 50% female). TOP has been recognized both locally and with the GlaxoSmithKline Child Health Recognition Award.

In 2007, the Alamance County Health Department was awarded \$147,000 from the North Carolina Division of Public Health to carry out infant mortality reduction activities. Using the Targeted Infant Mortality Reduction Grant funds, the health department created the **Health Education for You, Ladies** program (HEY Ladies). HEY Ladies addresses health behaviors prior to pregnancy by providing one-on-one health education through motivational interviewing. Motivational interviewing is a client-centered method for enhancing intrinsic motivation for change among clients. This approach recognizes that change must come from the client, not the counselor, and explores reasons for the behavior, desire for change, level of confidence for change, and resolution of ambivalence toward the behavior. In the program's first two years, over 900 sessions have focused on nutrition, physical activity, smoking cessation, multivitamin use, contraception, and pregnancy planning. The health educator provides health behavior counseling, educational materials, follow-up, and referrals, if appropriate.

The Women's Health Clinic in the Alamance County Health Department offers family planning services, pregnancy tests, physical exams, Pap tests, STI screening and treatment, IUD clinics, and colposcopy to clients. Nurses and clinicians work as a team to provide efficient and thorough reproductive health services including education and counseling. Multiple changes have been made in clinic systems to ensure timely access for patients requesting birth control. Appointments are made available the same day whenever possible. The overall goals are to reduce unplanned pregnancies and optimize health prior to both planned and unplanned pregnancies. The clinic coordinates with other providers in mental health, health education, and wrap-around care to provide clients with needed resources and services.

a Available at <http://www.alamance-nc.com/fileadmin/alamance/Health/docs/CommunityAssessment2007sm.pdf>

b Rosters for TOP participants were compared with school rosters to determine the percentage of participant pregnancies.

*continued on page 494*

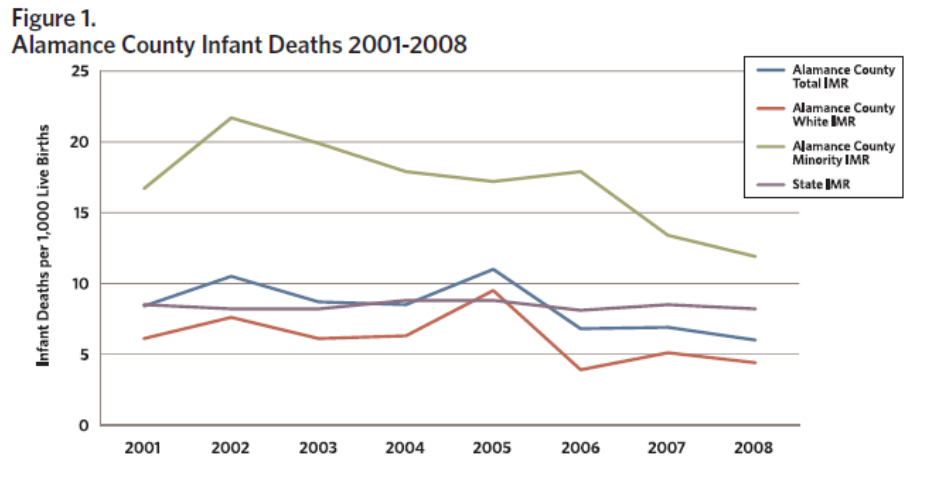


continued from page 493

The Mental Health Program at the Alamance County Health Department was established in April 2007 through a community health grant to address the comprehensive health needs of patients. In the department's maternity clinic, a licensed clinical social worker assists clients in dealing with stress and mental health issues during a particularly vulnerable period of time in a woman's life. The social worker serves clients who are working on both long- and short-term mental health concerns and has seen many clients successfully address these concerns, repair relationships, and heal from difficult life circumstances. An interpreter is available to assist the social worker with Spanish-speaking clients. Patient feedback reports that both English- and Spanish-speaking clients have a great sense of relief from discussing their mental health issues with their medical provider as well as the social worker who may give them an opportunity to explore issues in greater depth. The mental health program continues to strive towards the goal of "reattaching the head to the body" by providing positive collaboration between physical and mental health care. The program has established itself as an essential part of the overall clinical services provided through the health department.

The Alamance County Health Department continues to seek evidence-based approaches to improving the care and health of clients. One example is the newly implemented CenteringPregnancy prenatal care program. CenteringPregnancy alters prenatal care by bringing women out of individual exam rooms and into groups for their care. Women have their initial obstetrics visit in a traditional setting and then are invited to join 10-12 other women with similar due dates in meeting together regularly for prenatal care, health education, and social support. Women monitor their own health, review provider assessments of their progress, and are offered refreshments and time to socialize. Afterwards, participants gather for provider-facilitated group discussions regarding various prenatal topics. The Maternity Program offers a comprehensive package of services for pregnant women from conception to the immediate postpartum period. The all-female program staff includes two physicians, two certified nurse midwives, and one certified physician assistant.

From preconception through motherhood, the Alamance County Health Department is initiating innovative programs and using best practices to serve the mental and physical health care needs of women. As a result of these programs, the minority infant mortality rate for the county has fallen (see Figure 1). While the Alamance County Health Department cannot take all the credit, the organization is certainly making a great contribution to the women of Alamance County.






*Joseph "Barry" Bass, MSW, health director; Kathleen Shapley-Quinn, MD, medical director; Amanda Marvin, MPH, health educator/program manager; Stacie Turpin Saunders, MPH, health educator/program coordinator; Eric Nickens, Jr., MA, CHES, health education supervisor; and Aimee Vandemark, LCSW, Alamance County Health Department; all contributed to this article.*

Dr. Shapley-Quinn stated that clinically, H1N1 seems to be tapering down. The alternate care site plan is in place and opened its doors for four days with varied clientele up to about ten each day. Dr. Shapley-

Quinn stated that the space at Kernodle Clinic Easttown that has been offered for the alternate care site could potentially be used for other Public Health events in the future.

## XI. Health Director's Report

Mr. Barry Bass deferred to Ms. Bradsher to discuss the bad debt write-off request.

	<p><b>ALAMANCE COUNTY</b>  <b>Health Department</b>          319 North Graham-Hopedale Road Suite B          Burlington, NC 27217-2995  <a href="http://www.alamance-nc.com/d/health">www.alamance-nc.com/d/health</a></p>
<p>Joseph B. Bass, Jr., MSW          Health Director</p>	<p>(336) 227-0101          FAX (336) 513-5593</p>
<h3><u>Memo</u></h3>	
<p>To: Alamance County Board of Health          From: Barry Bass, Health Director          Re: Bad Debt Write-Off Request          Date: 12/15/2009</p>	
<p>For the period January 1, 2009-December 31, 2009 I am requesting to write off a total of \$34,275.84 in bad debt. This total consists of 419 persons and includes the following:</p>	
<ul style="list-style-type: none"> <li>• Old balances less than \$50.</li> <li>• Old balances for children with no responsible party's social security number.</li> <li>• Old balances for clients with no social security number.</li> <li>• Old balances for clients who have moved out of state.</li> </ul>	
<p>We are not able to recover these debts by way of the Debt Set-off Program and therefore need to write them off. Thank you for your consideration and approval of this request.</p>	
	
<p>Committed to Protecting and Improving the          Public's Health in Alamance County</p>	

***A motion was made by Mr. Charles Wilson to approve the Bad Debt Write-Off Request as presented. The motion was seconded by Dr. Donald Courtney and approved unanimously by the board.***

Mr. Bass deferred to Mr. Eric Nickens to present the State of the County Health (SOTCH) Report. Mr. Nickens stated that Alamance County's SOTCH report was submitted on the first Monday in December. This report was a concerted team effort; however, he recognized Ms. Kelley Kimrey for her hard work on the graphic layout and typesetting.

ALAMANCE COUNTY

STATE OF THE COUNTY HEALTH REPORT



DECEMBER 2009



**ALAMANCE COUNTY DEMOGRAPHICS-AT A GLANCE**

Below you will find the demographics for Alamance County and the state of North Carolina, according to the US Census, The Annie E. Casey Foundation-Kids Count Data Center, and the Employment Security Commission of North Carolina. Alamance County consists of nine municipalities. Burlington is the most populated city in the County, and Graham is the County's second most populated.

Demographics	Alamance County	North Carolina
Population (2008 est.)	148,053	9,222,414
White	67.88%	67.21%
African American	18.42%	21.20%
Hispanic/Latino	11.26 %	7.43%
Asian	1.21%	1.88%
American Indian	0.30%	1.13%
Other Ethnicity	0.93%	1.15%
Median Household Income (2008)	\$42,822	\$46,549
Mean Household Income (2008)	\$55,239	\$63,005
Per Capita Income (2008)	\$23,012	\$25,215
Persons Below Poverty (2008)	18%	15%
Persons without Health Insurance (2008)	17%	16%
Children Living in Poverty (under 18yrs old) (2007)	18%	20%
Households that Received Food Stamps (2008)	5,243	344,069
Unemployed (Sept. 2009)	12%	10%
Students Eligible for Free & Reduced School Lunch (2007)	54%	55%

**IN THIS REPORT:**

- \*Statistical Update 1-2
- \*Ongoing Public Health Work 3-5
- \*Priority Area Progress 6-13
- \*Emerging Issues 14

*This SOTCH Report will be disseminated directly to the Alamance County Board of Health, Healthy Alamance Board of Directors, Alamance County United Way, Alamance County Community Council Members, Alamance County Libraries, Alamance-Burlington Schools, and Alamance Regional Medical Center. The information compiled in this report will be posted on the Alamance County website, [www.alamance-nc.com](http://www.alamance-nc.com), and the Health Alamance website, [www.healthyalamance.com](http://www.healthyalamance.com). A press release will be issued to all local media summarizing the contents of this report. To obtain more information about this SOTCH please contact Alamance County Health Department (336) 227-0101. To become more involved with the local initiatives please contact Healthy Alamance (336) 513-5590. Your time in reading this report is appreciated.*

**MORBIDITY-COMMUNICABLE DISEASE**

Since the 2008 State of the County Health Report many of Alamance County's communicable disease rates have not significantly changed according to the latest trend data from the North Carolina State Center for Health Statistics.

**Disparities**

- Incidence rates for syphilis, gonorrhea, and AIDs are higher among minorities compared to the total rate for Alamance County.
- The minority gonorrhea rate, although higher than the total rate, continues to decline; from 630.0 in 2001-2005 to 581.3 in 2003-2007.
- The minority syphilis rate, though it remains higher than the total Alamance County rate and higher than the state rate, has continued to decrease from 9.8 in 2001-2005 to 8.2 in 2003-2007.

Communicable Disease Rates per 100,000 population (2003-2007)	North Carolina	Alamance County Rate
AIDS Rates	12	8.6
Gonorrhea	181.9	160.7
Primary & Secondary Syphilis	2.9	2.2

**Strengths**

- Alamance County's five year AIDS rates have slightly decreased from 9.1 per 100,000 in 2001-2005 to 8.6 per 100,000 in 2003-2007.
- Alamance County's gonorrhea rate remains steady at 160.7 per 100,000 compared to 161.6 per 100,000 in 2002-2006 and is significantly lower than the state rate of 181.9 per 100,000.

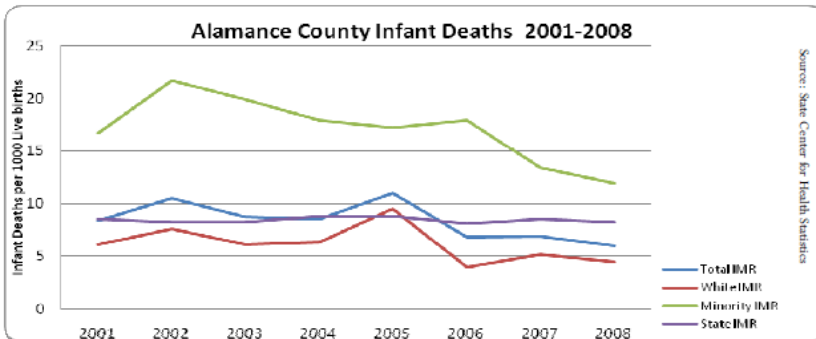
**MORTALITY**

Rank	ALAMANCE / Total Deaths
1	Cancer – All sites / 313
2	Heart Disease / 296
3	Cerebrovascular disease (stroke) / 100
4	Chronic lower respiratory disease / 73
5	Alzheimer's disease / 53
6	Other Unintentional injuries / 40
6 (t)	Diabetes mellitus / 40
8	Nephritis, nephrotic syndrome, & nephrosis / 37
9	Pneumonia & influenza / 22
10	Motor vehicle injuries / 21

The most recent data available from the North Carolina State Center for Health Statistics (2006) reveals that the leading causes of death in Alamance County are similar to those in counties across the state and nation. Cancer is the leading cause of deaths, heart disease accounted for 22% of deaths and stroke accounted for 7.4%. More than half of the deaths in the county were from one of these three causes. The rates for 2007 and 2008 should be available in January 2010 and can be accessed <http://www.schc.state.nc.us/SCHS/>.

**INFANT MORTALITY**

Infant mortality is defined as a death that occurs before an infant's first birthday. Alamance County's infant mortality rate for 2008 was 6.0 infant deaths per 1,000 live births. This marks the third year that Alamance County has achieved an infant mortality rate significantly lower than the previous five years. In addition, this is the third consecutive year that the county rate is lower than the state rate of 8.2 infant deaths per 1,000 live births. In 2008, the county reported 12 infant deaths. The state of North Carolina reported a total of 1,066 infant deaths in 2008. The white infant mortality rate for Alamance County decreased from 5.1 deaths per 1,000 live births in 2007 to 4.4 deaths per 1,000 live births in 2008. The infant mortality rate among minorities decreased from 13.4 deaths per 1,000 live births in 2007 to 11.9 deaths per 1,000 live births in 2008. The minority infant mortality rate has seen a downward trend for the last six years. However, the minority infant mortality rate in Alamance County is more than two times greater than the white infant mortality rate.



**CenteringPregnancy®:** In August 2009, Alamance County Health Department (ACHD) began offering CenteringPregnancy® prenatal care to maternity clients in an effort to improve birth outcomes. CenteringPregnancy® alters routine prenatal care by bringing women out of exam rooms and into groups for their care. Women have their initial OB visit in a traditional setting at which time they are invited to join 10-12 other women with similar due dates in meeting together regularly for prenatal care and health education. The groups form between 12 and 16 weeks of pregnancy and continue through the early postpartum period meeting every month for the first four months and then bi-weekly. Women learn not only from the facilitator but, more importantly, from one another and their own experiences. The inaugural ACHD group consists of nine maternity patients with varying backgrounds. Studies involving other sites have found that participants were less likely to experience preterm birth, maintained preterm pregnancies longer, had better birth weight outcomes, and initiated breastfeeding at a higher rate compared to traditional prenatal care participants (Ickovics, 2003 & 2007). In addition, participants have shown an improvement in prenatal knowledge and readiness in baby care compared to traditional care (Ickovics, 2007).

In 2007, the HEY Ladies program was created using targeted Infant Mortality Reduction Grant funds. HEY Ladies is a preconception health education program utilizing motivational interviewing to help individuals with behavior change.

Since 2007, the HEY Ladies program has conducted over 1000 health education counseling sessions. Over 740 Multivitamins with folic acid and 560 wellness prescriptions have been distributed.

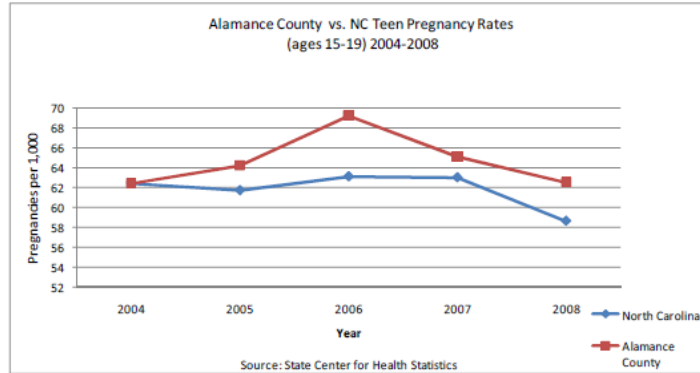
In 2008, using grant funds, the Healthy Beginnings Program began. This program works to improve social networks and social capital among African American women of childbearing age in an impoverished zip code.

Over 50 women have been served by the Healthy Beginning Program with ages ranging from 16-48 years. Services and classes offered include Financial Literacy, Self Esteem, Anger Management, Nutrition, Physical Activity, and SIDS prevention.



**TEEN PREGNANCY**

The Alamance County teen pregnancy rate decreased again in 2008 to 62.5 pregnancies per 1,000 girls aged 15-19 compared to 65.1 in 2007. Though the rate keeps decreasing in Alamance County, it still remains higher than the state rate of 58.6 in 2008 and 63.0 in 2007. In 2008, among girls ages 10-14, six pregnancies were reported compared to 14 pregnancies in 2007. There were 349 pregnancies among girls ages 15-19 in 2008 compared to 356 pregnancies in 2007. Strides are continuously being made to reduce the teen pregnancy rate in Alamance County.



In addition to the ongoing Teen Outreach Program (TOP) that has been implemented in Alamance County since 2003, progress is being made to increase parent-child communication. TOP, in collaboration with the Adolescent Health Partnership and Healthy Mothers, Healthy Babies Coalition of Alamance County (HMHB), hosted a Mother N' Daughter Walk-A-Thon. Participants walked a half mile trail and participated in a fact

finding scavenger hunt along the trail. They were given a set of questions regarding at-risk behaviors they had to answer using information posted on signs around the trail. The information included state and county statistics, pregnancy and STD information, abstinence, alcohol and drug information, self-esteem tips, and resources for teens. One of the community partner members translated the scavenger hunt questions and answers in Spanish to better serve the Hispanic community. Teens and parents also had an opportunity to visit booths representing agencies and organizations offering services for youth across Alamance County. The Mother N' Daughter Walk-A-Thon event was a strong and positive step towards preventing teen pregnancies and other health concerns for mothers and daughters in Alamance County.

To coincide with this event, TOP worked with community partners to purchase billboards to be posted throughout Alamance County which focused on parent-child communication with their children and served to kick off teen pregnancy prevention month. The billboards posted throughout the county featured this message "Every Morning an Alamance County Teen Wakes up Pregnant, Talk to Your Kids before it's Too Late". This message was launched to raise awareness about teen pregnancy and to encourage dialogue between parents and teens as a prevention tactic. The Alamance News featured an article about how the billboard draws attention to the county's teen pregnancies. The article presented information based on the 2007 reported pregnancy data. This article and the billboards made the community aware of the current teen pregnancy state in Alamance County and how much remains to be done.





**AIR QUALITY**

According to the 2007 Community Health Assessment (CHA), Alamance County has high levels of fine particle pollution, which is formed when gases from fuel react with sunlight and water vapor. This pollution has important health consequences for asthmatic children and the community at large. The EPA's acceptable cancer level due to pollution is one case in a million. The risk in Alamance County is 226 times greater than the acceptable level. While our proximity to the interstate is surely one cause of this problem, our own actions, such as idling, can exacerbate the issue.

According to the Alamance Burlington School System, there were a total of 1539 students with parent-reported asthma for the 2008-2009 school year, and the school system's medication survey showed 464 students taking asthma medications. Alamance County's hospitalization rate for childhood asthma was 5% higher than the state rate in 2005. According to Alamance Regional Medical Center, there were 238 children under the age of 18 that visited the hospital between October 2008 and September 2009 with asthma related symptoms, 173 of those had gone to the emergency department.

Because of the above facts, Alamance County community partners formed the Healthy Alamance Child Asthma Coalition. The Coalition continues to keep the community informed about the quality of air they breathe by seeking to reduce the burden of asthma in Alamance County through public awareness, education, and administration of asthma related activities. In October 2009, the Coalition was awarded the Enhancing Local Asthma Efforts grant to raise awareness on air quality. The current Air Quality Awareness Flag program will expand to include 26 additional community sites and place Air Quality Awareness magnets on all 16 Environmental Health vehicles. Anti-idling signs will be purchased and displayed at prominent drop-off and pick-up locations throughout the county. These signs will serve as a reminder to bus drivers, parents and caregivers the importance of turning off their car when waiting for their child.



## Substance Abuse

### Tobacco Prevention

Healthy Alamance Substance Abuse Task Force (SATF)



#### North Carolina, now serving smoke-free air!

On May 19th 2009, Governor Perdue signed House Bill 2, Prohibiting Smoking in certain public places into law. HB2 will go into effect on January 2nd, 2010 and provide protection from secondhand smoke in restaurants and bars across the state. HB 2 also authorizes some expansion of local control so that local governments can pass local ordinances restricting smoking in some other public places, including some worksites. The General Statute 130A-497, otherwise known as North Carolina's Smoke-Free Restaurants and Bars Law, was put into place because the NC General Assembly reviewed the finding that secondhand smoke has been proven to cause cancer, heart disease, and asthma attacks in both smokers and non-smokers. In 2006, the United States Surgeon General reported that "there is no risk-free level of exposure to secondhand smoke." This means that breathing in even a small amount of smoke from someone else's cigarette, cigar, or pipe could be harmful to you. The new law will protect people from the harm caused by secondhand smoke. The Alamance County Health Department will be working closely with business owners in regards to HB 2 legislation. To learn more, the state has developed a new website dedicated to educating the public on this issue, please visit: <http://www.smokefree.nc.gov>. The Healthy Alamance Chronic Disease Coalition, Child Asthma Coalition, and Substance Abuse Task Force have all been working hard to educate and advocate for smoke free workplaces and restaurants. On behalf of these committed volunteers and health professionals we would like to thank the representatives in Raleigh who supported HB 2.

The SATF acts as an advisory board for the administration of the Alamance-Caswell-Rockingham LME's NC Health and Wellness Trust Fund Teen Tobacco Use Prevention and Cessation Initiative grant. Phase III concluded in June 2009, and Phase IV of this grant runs from July 2009 through June 2012. A variety of tobacco prevention activities are conducted through this grant and the SATF, including youth empowerment, support for the Tobacco-Free Schools policy in the Alamance-Burlington School System, merchant education, the award-winning smoke-free restaurant campaign, community education, and parent education.

ActUp, is Alamance County's TRU group. TRU – Tobacco.Reality.Unfiltered – is a statewide youth movement promoting tobacco use prevention and cessation among young people. ActUp is composed of teens from ABSS high schools and continues to expand its membership. The teens are trained in tobacco-related topics, from Tobacco 101 to Advocacy 101, and are actively involved in the planning and implementation of tobacco prevention programming in ABSS and across the county.

The SATF and ActUp continue to promote public knowledge of the ABSS 100% Tobacco-Free Schools Policy and also work with ABSS to promote best practices to increase compliance with the policy. The LME promotes cessation resources available to students and staff from Quitline NC, in-school through Not-On-Tobacco classes for teens, and cessation classes for adults through Alamance Regional Medical Center (ARMC) and the Alamance County Health Department (ACHD).

### Tobacco Prevention

The LME continues to work with the local Alcohol Law Enforcement (ALE) to ensure that tobacco and alcohol merchants are educated on the laws surrounding the sale of age-restricted products. In the summer of 2009, ActUp visited 22 local tobacco retailers to promote the Red Flag campaign, which encourages the careful checking of ID for age-restricted products, and to conduct StoreAlert surveys, in which tobacco ads are identified and counted within stores. Half of the stores surveyed received failing grades for StoreAlert because they had too many ads or ads that were too accessible to youth (i.e. child eye level, or near candy).

To get involved with ActUp, contact [AlamanceTRU@gmail.com](mailto:AlamanceTRU@gmail.com). For more information on the SATF, please contact Healthy Alamance.

For resources to help you quit please contact, NC Tobacco Use Quitline.



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## Substance Abuse

### Alcohol Prevention

#### Underage Drinking Prevention

#### Healthy Alamance Substance Abuse Task Force

#### Elon Community Coalition to Prevent Underage Drinking

Last year The Healthy Alamance Substance Abuse Task Force was awarded one of eight North Carolina Coalition Initiative (NCCI) grants that would build capacity of community coalitions to develop a strategic prevention framework leading to the development of environmental strategies to reduce substance abuse.

As a result of this funding, the Elon Community Coalition to Prevent Underage Drinking formed to narrow the geographic focus and to serve as a prototype of underage drinking initiatives that could be replicated in other parts of the county. This community was identified based on the unique needs of the area, support from local law enforcement, the school system and local university. This community includes both urban and rural areas including the Town of Elon, west Burlington and the northwestern parts of Alamance County.

The Elon Community Coalition to Prevent Underage Drinking partners with the Healthy Alamance Substance Abuse Task Force in addressing many issues related to substance abuse as well as other health and social issues that impact the well being of all citizens in Alamance County

Below is a snapshot of recent projects:

- Working closely with Alamance Burlington School System, Elon University, and various other youth groups such as : Alamance County Youth Advisory Council, ABSS DREAM Team, and Elon's Peer Educators.
- Implemented several Community Awareness campaigns including the 0-1-2 Campaign. This is defined as 0 drinks for those under 21, those who are driving, are pregnant or in recovery. For those over 21, who choose to drink alcohol, the recommended daily use is 1 standard drink per day for women and 2 standard drinks for men (a standard drink is 12oz. beer, 5oz. Wine and 1.5oz. 80 proof spirits).
- Talk It Up-Lock It Up is part of the SAFE HOMES program where parents pledge to provide adult supervision and not serve alcohol to underage youth in their homes or property, secure alcohol,, prescription drugs, firearms and other hazardous items and to encourage communication with other parents. Talk It Up-Lock It Up encourages parents to lock up their alcohol, to monitor the alcohol in their homes and of purchase large quantities of alcohol that is not secured.
- Conducted alcohol purchase surveys where a person over age 21 attempts to purchase alcohol in local retail establishments. The goal is to determine stores that would sell to a youthful appearing person without checking for proper identification and refusing to sell without proper identification. The coalition is noting an improvement with those establishments who comply with the law since the surveys began in 2006.

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## Alcohol Prevention



Members of the *Alamance County Youth Advisory Council* receiving United Way's Outstanding Volunteer Award for their work in addressing underage drinking in the community!

- Currently conducting community conversations with a range of citizens regarding their views and behavior around alcohol. The goal is to identify issues and trends of community members' concerns to be used for strategic planning purposes as well as increase the awareness about the issue of alcohol and underage drinking in the community.
- The coalition has also been active in policy advocacy providing educational efforts to support increasing the beer tax, a proven method to reduce the use of alcohol by underage, price sensitive youth and advocate keeping the legal drinking age at 21, to counter a national movement from the Amethyst Initiative to lower the legal drinking age.
- Red Ribbon Week activities received media attention via 4-TV spots including: History of the Movement, K-9 Demonstration, Plant the Promise, Community Resources & Pray for the Children.

To get involved with the Elon Coalition, please email [kwebb7@bellsouth.net](mailto:kwebb7@bellsouth.net)



## CHRONIC DISEASE

The Healthy Alamance Chronic Disease Coalition continues to be active since established because chronic disease remains a top priority. It was formed to encourage disease prevention and reduce health disparities related to Heart Disease/Stroke, Cancer, and Diabetes. The group works in three subgroups: programs, policy, and media. Educational sessions for coalition members have been conducted bi-monthly on topics such as cancer, diabetes, physical activity, tobacco and participatory research.

Below are some accomplishments from 2009.

- Alamance & Graham Downtown Walking programs have been ongoing for 6-weeks both in the fall and spring, resulting in over 100 participants.
- Healthy Alamance was recertified as a Healthy Carolinian Partnership.
- Hillcrest Elementary School received the Fruit and Vegetable grant from the USDA. The Alamance County Health Department and Healthy Alamance have partnered with the school system on this initiative.
- Healthy Alamance is now on Facebook.
- The Health Department continues to promote wellness through programming at child care centers and industries.
- Implemented an annual Winter Moving Fest to engage the community in physical activity in the wintertime in partnership with the City of Graham. (Photos from the event are below.)



### CHRONIC DISEASE

Healthy Alamance was recognized by the state for work done in the faith community surrounding diabetes prevention with the Charles Blackmon Leadership Award for Eliminating Health Disparities in October 2009. The Being Healthy Counts to HIM program and Faith Based Initiative continue to be dynamic in the county. A Faith Forum is being planning for 2010 in which church leaders can come together and receive education on how to start a health ministry. This program was also recognized by NC State University and was presented at the Annual Southeast Chapter of the American College of Sports Medicine (SEACSM) in February 2009.

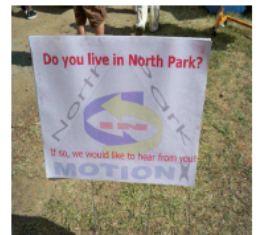


The Alamance County Health Department, Healthy Alamance, along with Elon University and Alamance Burlington School System have been working with the City of Burlington on the second year of funding through the FIT Community Grant, funded by the NC Health & Wellness Trust Fund and managed by Active Living by Design. The program, called North Park in MOTION, has truly taken shape in East Burlington where the year two activities are taking place. Opportunities for dance, walking, biking, and leadership are underway.

The Alamance County Health Department in partnership with Cooperative Extension had their first on-site Community Garden Program this spring and continued the weekly Farmers Market.



To get involved with the Chronic Disease Coalition please contact Healthy Alamance at 336-513-5590.





**TRANSPORTATION****Study deems public transit possible for Alamance County in 2011**

[By Michael D. Abernethy / Times-News](#)

August 16, 2009

Results of a privately funded study show the possibility of fixed-route public transit in Alamance County by July 2011.

The 50-page report, which includes guidance for funding and routes, will be presented to the Burlington-Graham Transportation Advisory Committee, a board of local officials that works with the state on transportation issues. The report gives a timeline for three phases of bus service, beginning with park-and-ride service in October 2010 and expanding to fixed-route service by 2011.

The report was created using a 2006 feasibility study and input from residents in Burlington, Graham, Mebane, Elon, Gibsonville and Haw River, as well as the Piedmont Authority for Regional Transit — which runs bus service in Triad counties. PART is currently in talks with Burlington and Alamance County officials to start a commuter park-and-ride service here.

The city of Burlington has earmarked federal grants and stimulus money that would pay for buses and build three park-and-ride lots in Alamance County near Interstate 85/40, said City Manager Harold Owen. The City Council has endorsed a park-and-ride system, which hinges on action and additional taxes enacted by the Alamance County commissioners. The council has not endorsed a fixed-route transit system.

The study was funded by the Hayden-Harman Foundation, a private, nonprofit organization that supports large-scale projects in and around Alamance County. Kurt Neufang, with Charlotte-based planning firm URS Corporation, completed the report.

Patrick Harman, Executive Director of the Hayden-Harman Foundation, says the report is meant as a guide for local governments to move forward with planning and paying for public transit.

Bus fare would be \$1.25, with seniors and the disabled paying 60 cents per trip. The 2006 study estimated 150,000 passengers within the first year of service, growing to about 185,000 passengers in the second year.

Fares would only cover about 12 percent of the cost needed to pay for busses, fuel and maintenance. Most of the funding would come from a \$1 addition to local vehicle taxes. That measure has been discussed but not yet approved by the Alamance County commissioners.

It will take about \$3.8 million to pay for buses and park-and-ride lots for startup. A longer-range outlook shows a \$700,000 to \$800,000 annual financial commitment that would be shared between the county and municipalities.

A public transportation implementation study funded by the Hayden-Harman Foundation shows the possibility for fixed-route bus service as soon as July 2011. The study will be presented to local officials this week and includes the following steps:

**TRANSPORTATION**

- Phase IA — Park and Ride, October 2010  
Shuttles to and from three park-and-ride lots, provided by Piedmont Authority for Regional Transportation, would begin bus service in Alamance County. The lots would be close to Interstate 85/40, near Alamance Regional Medical Center in Burlington, between N.C. 87 and N.C. 54 in Graham and near the Mebane Oaks Road exit in Mebane. The park and ride service would connect commuters to bus services in Greensboro and Winston-Salem and to Chapel Hill and the Triangle.
- Phase IB — Local feeder service, January 2011  
Three feeder routes would take people to and from the park-and-ride lots to downtowns, shopping areas and the hospital.  
University Drive, Huffman Mill Road, Webb Avenue, and North Church Street to U.S. 70 East would be the major routes for picking up passengers at Elon University, ARMC, Alamance Crossing, downtown Burlington and Graham, Haw River and Mebane.
- Phase II — Fixed-route service, July 2011  
Seven fixed-route shuttles would run hourly and half-hourly service. They are: Burlington-Gibsonville; Burlington-Graham-Mebane; West Church; East Burlington; Feeder Service Route 3, from east Burlington to Mebane; Burlington-Elon; and Elon-Alamance Crossing.

**The Transportation Task Force that was formed after the 2007 Community Assessment has worked hard to educate and advocate for the development of public transportation in Alamance County. As a result, over 1,000 people signed a petition in 2009 in support of public transportation for Alamance County.**

Public PetitionIn support of Public Transportation in Alamance County

To: All governing councils within Alamance County, NC  
 Alamance County Commissioners  
 Burlington City Council  
 Graham City Council  
 Town of Elon Board of Aldermen  
 Town of Gibsonville Board of Aldermen  
 Mebane City Council  
 Town of Haw River Council

We, the undersigned petitioners, support the recent efforts of our local officials to learn about and discuss the development of a public transportation system within Alamance County.

We, the undersigned petitioners, support the effort of the Burlington City Council and Alamance County Commissioners to partner with the Piedmont Authority for Regional Transportation (PART) to develop a park-and-ride service for Alamance County.

We, the undersigned petitioners, request that our local governing councils support the development of a fixed-route service within Alamance County through capital investment, collaboration among municipalities, grant funds, and dedicated revenues.

We, the undersigned petitioners, believe a fixed-route service would be of the greatest benefit for us and our neighbors. A fixed-route service would allow us and our neighbors to access services, commute to work, maintain our independence, and meet everyday household needs while saving money.

We, the undersigned petitioners, commit to using a fixed-route service when implemented in Alamance County.

## H1N1

In April 2009, a new flu virus was first detected in people in the United States. First called "swine flu", the virus is now identified as 2009 H1N1 flu. This virus is spread from person-to-person worldwide and was declared a pandemic on June 11. This was the first pandemic flu virus in more than 30 years, but no surprise to the Health Department, who has had a pandemic flu plan for several years.

Right away, the ACHD Epidemiology team stood up a response that coordinated efforts to reduce death, disease, and social disruption from this illness. The Health Department was the lead agency in a unified command with many local agencies. In a rapid pace of information and briefings, local public health and local emergency response partners gathered information about the unfolding situation and began an on-going public information campaign. Activities included delivering isolation and quarantine orders, and when those were no longer useful, establishing criteria for increased vigilance and recommendations for schools, child care centers, businesses, and area providers.

Human infections with 2009 H1N1 are ongoing in Alamance County. Unlike seasonal flu, most cases are children and young adults. In most cases, the virus is causing mild to moderate illness. In the beginning, the Health Department activated isolation and quarantine plans to contain the disease and coordinated testing and reporting of suspect and probable cases. By June, person-to-person transmission was established locally, so our strategy shifted away from testing to enhanced surveillance in schools and childcare centers, along with providing education and recommendations in a variety of settings about community mitigation and social distancing measures that will limit the spread of disease.

Most people who have become ill with this new virus have recovered without requiring medical treatment. In May and October, the Division of the Strategic National Stockpile (SNS) released assets, including antivirals and personal protective equipment, in case of local shortages.

When the H1N1 flu vaccine became available in mid-October, the Health Department hosted clinics and facilitated distribution in a blended campaign with more than 80 partners, ranging from private practice doctors' offices and pharmacies to worksites and schools.

To date the Health Department has administered over 2200 vaccines to the community, staffed the flu call line, answered hundreds of flu calls in house and kept our clinics going here at the health department, too.

For more information about H1N1 in Alamance County, please visit [www.alamanceflu.com](http://www.alamanceflu.com)

Mr. Bass presented the board with a revised organizational chart that will go into effect on January 1, 2010. Changes include: Janna Elliott will report directly to Mr. Bass; Michele Herbek will report directly to Mr. Bass; Kathy Brooks will report directly to Ms. Bradsher; Janet Clayton will report directly to Ms. Garrett.

**XII. Old Business**

There was no old business discussed.

**XIII. New Business****A. 2010 Board of Health Meeting Schedule**

**2010 MEETING SCHEDULE  
ALAMANCE COUNTY BOARD OF HEALTH**

The Board of Health meetings are held in the Professional Boardroom  
(Room S-118) of the Human Services Center.

**BOARD OF HEALTH**

**(Third Tuesday of the Month)**

**Tuesday, February 16, 2010, 6:30 pm**

**Tuesday, April 20, 2010, 6:30 pm**

**Tuesday, June 15, 2010, 6:30 pm**

**Tuesday, August 17, 2010, 6:30 pm**

**Tuesday, October 19, 2010, 6:30 pm**

**Tuesday, December 21, 2010, 6:30 pm**

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The Personal Health Committee, composed of Board of Health members, meet in the  
Health Department Conference Room (Room 1129).

**PERSONAL HEALTH COMMITTEE**

**(Third Tuesday of the Month)**

**Tuesday, January 19, 2010, 6:00 pm**

**Tuesday, March 16, 2010, 6:00 pm**

**Tuesday, May 18, 2010, 6:00 pm**

**July, 2010 (No Meeting Scheduled)**

**Tuesday, September 21, 2010, 6:00 pm**

**Tuesday, November 16, 2010, 6:00 pm**

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This committee serves as the Quarterly Family Planning Review Committee. Information  
relating to the Family Planning Program will be shared at each meeting.

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The Environmental Health Committee, composed of Board of Health members, meet in  
the Health Department Conference Room (Room 1129).

**ENVIRONMENTAL HEALTH COMMITTEE**

**(Third Tuesday of the Month)**

**Tuesday, January 19, 2010, 12:00 pm**

**Tuesday, March 16, 2010, 12:00 pm**

**Tuesday, May 18, 2010, 12:00 pm**

**July, 2010 (No Meeting Scheduled)**

**Tuesday, September 21, 2010, 12:00 pm**

**Tuesday, November 16, 2010, 12:00 pm**

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The proposed 2010 Board of Health schedule was adopted by consensus.

**B. Election of 2010 Board of Health Officers**

Mr. Gooch appointed Dr. Woodard, Ms. Puckett, Dr. Courtney and Mr. Wilson to a nomination committee that will meet to nominate Board of Health officers for 2010.

**XIV. Other**

Mr. Bass informed the board that the NALBOH newsletter is included in their packets.

**XV. Closed Session**

*The meeting went into closed session per N.C. General Statute 143-318.11 (a) (6) at 7:47 p.m. on a motion by Dr. Michael Blocker for the purpose of discussing a personnel issue. The motion was seconded by Dr. Reid Woodard.*

*The closed session adjourned into open session at 8:01 p.m. on a motion by Dr. Donald Courtney and second by Dr. Reid Woodard.*

Mr. Gooch announced that a personnel matter was discussed during the closed session.

**XVI. Adjournment**

With no further action or discussion, the meeting adjourned at 8:02 p.m.

**ALAMANCE COUNTY BOARD OF HEALTH**

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Dr. Reid Woodard, Acting Chairman

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Mr. Joseph B. Bass, Jr., Secretary