

ALAMANCE COUNTY BOARD OF HEALTH

Minutes

Regular Meeting of the Board of Health

October 18, 2011

The Alamance County Board of Health met at 6:00 p.m. on Tuesday, October 18, 2011, 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: Dr. Michael Blocker, Chairman; Dr. Donald Courtney, Vice-Chairman; Ms. Linda Massey, Commissioner; Ms. Kathleen Colville; Dr. William Porfilio; Ms. Lynda Puckett; Mr. Michael Venable; and Mr. Charles Wilson.

The following staff members were present: Mr. Barry Bass, Mr. Carl Carroll, Ms. Christy Bradsher, Ms. Kathleen Brooks, Dr. Kathleen Shapley-Quinn, Ms. Gayle Shoffner, and Ms. Janna Elliott.

I. Call to Order

Dr. Michael Blocker, Chairman, called the meeting to order at 6:29 pm.

II. Approval of the August 16, 2011, Board of Health Minutes

A motion was made by Mr. Charles Wilson to approve the August 16, 2011, Board of Health minutes. The motion was seconded by Ms. Lynda Puckett and approved unanimously by the board.

III. Public Comment

No public comments were made.

IV. Administrative Reports

A. Personnel Update

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

October 18, 2011	
<u>PERSONNEL UPDATE</u>	
<i>New Hires / Transfers / Resignations:</i>	
<ul style="list-style-type: none">• Jillian Cannon resigned from her position as Public Health Nurse I effective September 30, 2011.	
<i>Recruiting to fill the following positions:</i>	
<ul style="list-style-type: none">• Administrative Assistant I, replacing Janet Clayton (appointment pending)• Processing Assistant III – Finance Clerk, replacing Dianna Hunter (appointment pending)• Processing Assistant III – Dental Clinic, replacing Nancy Chiafulio (appointment pending)	
<i>Vacant positions:</i>	
<ul style="list-style-type: none">• Dentist I, replacing Roberta Osborn (frozen until July 2012)• Licensed Clinical Social Worker, replacing Mary White (frozen until July 2012)• Public Health Nursing Director III, replacing Debra Garrett (frozen until July 2012)• Public Health Nurse I (50%), replacing Emily Barrows (frozen until July 2012)• Public Health Nurse II, replacing Rhonda Rambeaut (frozen until July 2012)• Public Health Nurse I, replacing Jillian Cannon (frozen until July 2012)	
Updated 10/18/2011	

Dr. Blocker led a discussion regarding the frozen Dentist position. Direction was given to request to recruit for this position with a higher pay rate; this should prove to be more cost effective than contracting with a dentist at a higher rate.

B. Budget Amendments/Transfers

Ms. Christy Bradsher presented the Health, WIC and Dental amendments and transfers 3 – 9 for the 2011-2012 fiscal year for board approval:

Budget Amendments and Transfers FYE 12				
BUDGET ACCOUNT		TRIAL	STATE	COUNTY
CODE	DESCRIPTION	BALANCE	BUDGET	BUDGET
REVISION #	3		DEPT. NAME: Health	
STATE BUDGET:			TRANSFER: AMENDMENT: X	
Expenditures:				
110-5110-630	Asthma Grant	1,410.00	1,410.00	1,410.00
Revenue:				
310-3511-330	Asthma Grant	1,410.00	1,410.00	1,410.00
Funds received from the NC Division of Public Health, Chronic Disease & Injury Branch. Funds will be used to provide education, awareness, and administer asthma prevention activities.				
Explanation:				
BUDGET ACCOUNT		TRIAL	STATE	COUNTY
CODE	DESCRIPTION	BALANCE	BUDGET	BUDGET
REVISION #	4		DEPT. NAME: Health	
STATE BUDGET:			TRANSFER: X AMENDMENT:	
Revenue:				
310-3990-902	Designated Fund Balance	(26,821.18)	(26,821.18)	(26,821.18)
Expenditures:				
110-5110-637	Centering Pregnancy Grant	22,882.49	22,882.49	22,882.49
110-5110-605	Public Health Quality Improvement	3,938.69	3,938.69	3,938.69
In order to continue Centering Pregnancy and Public Health Quality Improvement grant funded services, transferred amounts not used in FY 10-11 into current budget (FY 11-12).				
Explanation:				
BUDGET ACCOUNT		TRIAL	STATE	COUNTY
CODE	DESCRIPTION	BALANCE	BUDGET	BUDGET
REVISION #	5		DEPT. NAME: WIC	
STATE BUDGET:	WIC		TRANSFER: X AMENDMENT:	
Expenditures:				
110-5150-440	Contracted Services	(7,000.00)	(7,000.00)	(7,000.00)
110-5150-321	Telephone & Postage	1,500.00	1,500.00	1,500.00
110-5150-231	Educational Supplies	3,500.00	3,500.00	3,500.00
110-5150-260	Department Materials & Supplies	2,000.00	2,000.00	2,000.00
Transfer needed for WIC program to meet program guidelines and utilize allocated funds. Items to be purchased include calendars with WIC approved recipes, nutrition education materials for participants. Communication devices to be used by vendor monitoring coordinator while out at local food vendors.				
Explanation:				
BUDGET ACCOUNT		TRIAL	STATE	COUNTY
CODE	DESCRIPTION	BALANCE	BUDGET	BUDGET
REVISION #	6		DEPT. NAME: Health	
STATE BUDGET:			TRANSFER: AMENDMENT: X	
Expenditures:				
110-5110-(To Assign)	School Nurse Funding Initiative	100,000.00	100,000.00	100,000.00
Revenue:				
310-3511-(To Assign)	School Nurse Funding Initiative	100,000.00	100,000.00	100,000.00
In order to improve children's health and their readiness to learn, the North Carolina General Assembly ratified a 2004-2005 budget to appropriate funds supporting school nurse positions with the intent of reducing the student to school nurse ratio. In 2011 the North Carolina General Assembly passed House Bill 200 which became law on June 15, 2011. The bill requires all School Nurse Funding be distributed to local health departments as specified by the General Assembly.				
Explanation:				

BUDGET ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REVISION #	7		DEPT. NAME: Health	
STATE BUDGET:			TRANSFER: AMENDMENT: X	
Expenditures:				
110-5110-644	Temporary Assistance for Needy Families	14,624.00	14,624.00	14,624.00
Revenue:				
310-3511-309	Temporary Assistance for Needy Families	14,624.00	14,624.00	14,624.00
Explanation: Funds received from NC Division of Public Health. Funds will be used to provide contraception methods.				
BUDGET ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REVISION #	8		DEPT. NAME: Dental	
STATE BUDGET:			TRANSFER: X AMENDMENT:	
Revenue:				
310-3990-401	Designated Fund Balance	(20,000.00)	(20,000.00)	(20,000.00)
Expenditures:				
110-5160-351	Maintenance Repair Building & Grounds	8,000.00	8,000.00	8,000.00
110-5160-520	Capital Outlay Improvements	12,000.00	12,000.00	12,000.00
Explanation: The Dental Clinic is in need of renovations which include replacing dental chairs, and bringing counter tops and other equipment up to industry standard. Funds are being transferred from their Designated Fund Balance account which holds previously generated revenue from 3rd party billing of dental services provided.				
BUDGET ACCOUNT CODE	DESCRIPTION	TRIAL BALANCE	STATE BUDGET	COUNTY BUDGET
REVISION #	9		DEPT. NAME: Health	
STATE BUDGET:			TRANSFER: X AMENDMENT:	
Revenue:				
310-3990-417	Designated Fund Balance	(75,000.00)	(75,000.00)	(75,000.00)
310-3990-418	Designated Fund Balance	(50,000.00)	(50,000.00)	(50,000.00)
310-3990-422	Designated Fund Balance	(150,000.00)	(150,000.00)	(150,000.00)
310-3990-441	Designated Fund Balance	(25,000.00)	(25,000.00)	(25,000.00)
Expenditures:				
110-5110-120	Salaries/Wages	225,000.00	225,000.00	225,000.00
110-5110-186	Benefits	75,000.00	75,000.00	75,000.00
Explanation: Funds transferred from Designated Fund Balance to cover cost of providing clinic services for remainder of current fiscal year.				

Ms. Bradsher and Mr. Bass informed the board about the recent budget meetings and guidance received from the County Manager in regards to the \$4.4M shortfall. Department Heads were instructed to make cuts of up to 10% of expenses. In a meeting with county management on Tuesday, October 11, 2011, Mr. Bass proposed cutting 9.11% by reducing the LabCorp contract, reducing contract staff, freezing five positions and transferring \$300,000 from the health department's designated fund balance. From the County Manager's presentation at the Board of Commissioners meeting on October 17, 2011, more than one third of the proposed internal cuts came from the health department. Board members expressed concern over the use of Health Department funds to offset the county's shortfall. Fiscal year 2010 – 2011 ended with the fund balance at \$1,566,123.33, which includes the

Dental Clinic's balance of \$187,116.51. After the grant monies are removed from this amount and once the \$300,000 is removed, the balance would be \$1,219,322.13. Mr. Bass explained that the money in the fund balance is earned revenue that should be used for Public Health related services.

A motion was made by Ms. Kathleen Colville to approve the Health, WIC and Dental budget amendments and transfers 3 - 8 for FY 2011-2012. The motion was seconded by Dr. Donald Courtney and was approved by the board unanimously.

Further discussion was held regarding revision 9, the transfer of \$300,000 from the designated fund balance to fund salaries and benefits. Board members voiced concern after Mr. Bass explained the Health Department offered more than 9% in cuts, including \$300,000 from the fund balance, when other county departments appear to have given up much less.

A motion was made by Mr. Charles Wilson to approve the Health revision number 9 for FY 2011-2012, with request that the Board of Commissioners consider other resources, such as the school system's fund balance, in order to keep from cutting health department services and keep from taking funds from the health department's fund balance. The motion was seconded by Dr. William Porfilio and was approved by the board unanimously.

V. Environmental Health Committee Report

Mr. Carl Carroll provided the committee with a summary of the minutes from the September 20, 2011, Environmental Health Committee meeting.

Alamance County Board of Health**Environmental Health Committee**

The Environmental Health Committee met on Tuesday, September 20, 2011, 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: Mr. Chad Huffine, Chairman and Dr. Donald Courtney.

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

Call to Order

Chairman Chad Huffine called the meeting to order at 12:00 pm.

Environmental Health Update

Mr. Carl Carroll informed the committee that revenues received thus far for the 2011 – 2012 fiscal year are favorable. August 2011 recorded the best revenues since May 2009. The first half of September 2011, looks to be comparable to August 2011, so Mr. Carroll is encouraged by these numbers. There has been an increase in permit applications.

Mr. Carroll discussed an article published in *The Times News* recently which discussed what public health has done and is doing since September 11, 2001. The article included quotes from Preparedness Coordinator, Shannon Alley, and provided good information about how public health employees are working as first responders with local law enforcement, fire fighters and the medical community. It also discussed how the federal and state governments assist with public health's rapid response to a biological or chemical attack.

Mr. Carroll informed the committee about two recent rabies clinics held last week. Dr. Houser assisted with both; one was held on September 13 from 5:00 – 7:00 pm at Mountain View Ruritan Club during which 87 animals were vaccinated; the other was held at Buttermilk Creek Outfitters on September 14 from 5:00 – 7:00 pm and vaccinated 55 animals. The adoption center is hosting a rabies clinic on September 24 from 9:00 – 11:00 am. Alamance Emergency Clinic hosts rabies clinics periodically as well at a reduced rate. At the previous Board of Health meeting, Mr. Carroll was asked to survey the local veterinarians to determine if they would participate in rabies clinics if the fee was increased from \$5.00 to \$10.00. Mr. Carroll prepared a letter, which he will email to local veterinarians to obtain their input. The letter provides information to them regarding the law change then inquires: "would you participate in rabies vaccination clinics organized by the Health Department during the first full week of May 2012 and the first full week of November 2012 if the fees were increased to \$10.00 per vaccination?" Veterinarians may email, fax or mail their response back to Mr. Carroll.

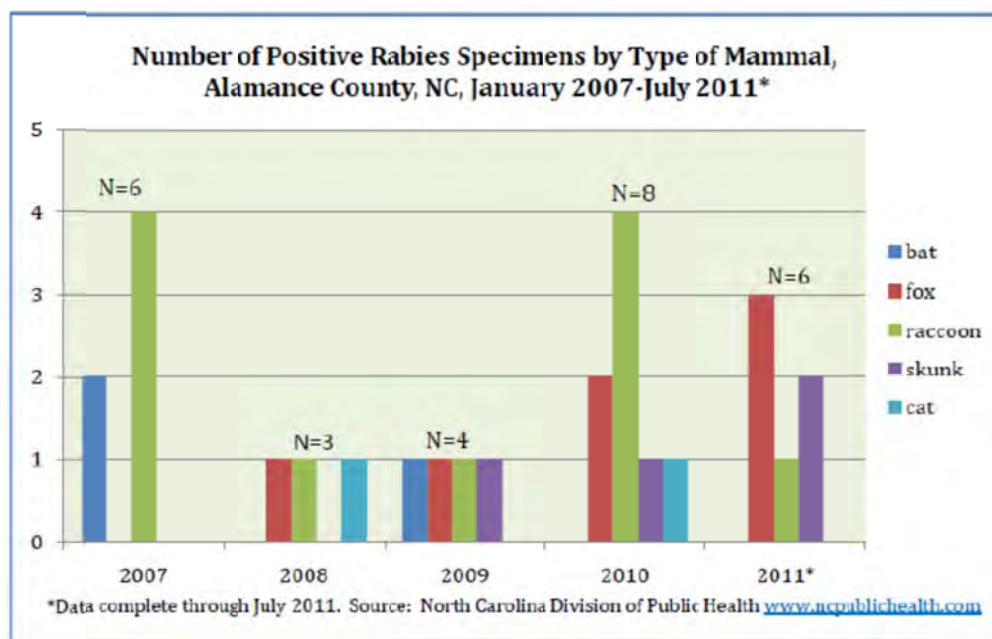
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Mr. Carroll provided the committee with the draft narrative of the Environmental Health Section of the Community Health Assessment and asked members to review and provide comments, suggestions or feedback before the end of September.

Rabies

Rabies is a fatal disease and a serious public health problem. Domestic pets, agricultural animals, and people can become infected with rabies. The rabies virus is usually transmitted from animal to animal through bites. ACHD reviews all animal bites reported by animal control personnel, veterinarians, physicians, and other sources. During the years 2007-2010, 993 bite reports were reviewed, up from 740 reports over the prior four years 2003-2006. During the same period, 286 specimens were tested for rabies, and 21 tested positive for rabies (see figure). For comparison, 269 specimens were submitted from 2003-2006, with 22 positives. Most of the specimens submitted from Alamance County are in wild animals, especially raccoons and foxes (see figure) <http://www.epi.state.nc.us/epi/rabies/state.html>. Animal and human exposures to rabies in Alamance County can largely be prevented by raising awareness concerning rabies transmission routes and avoiding contact with wildlife. ACHD uses each confirmed and suspect local case as an opportunity to deliver public health recommendations.




92% of households report their pets' rabies vaccinations are up-to-date, compared to 81% in 2007.

2011 Elon University Poll

Vaccinating pets against rabies is the single most important public health measure to protect against rabies. Therefore, NC rabies law requires all owned dogs, cats, and ferrets must be vaccinated against rabies by four months of age and be kept current with booster shots. To promote vaccination and increase access to rabies vaccines, ACHD partners with six local veterinary offices to sponsor week-long low cost vaccination clinics. Additionally, twice a year, ACHD hosts rabies clinics.

From 2007-2010, 2092 animals were vaccinated at the health department rabies clinics.

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Spaying or neutering pets reduces the number of unwanted animals that may not be properly cared for or vaccinated regularly. While 59% of surveyed respondents have pets, 22% have not spayed or neutered their pets. One in three pet owners report that the option has not been presented to them. The Spay and Neuter Clinic of Alamance County opened in 2009 as a division of Burlington Animal Services to provide low-cost spay and neuter surgery for dogs and cats. The number of animals taken by Animal Services was up in 2008-2009, with nearly 3000 dogs and cats surrendered by an owner due to economy and job loss, 4700 strays brought in within the city of Burlington. After the opening of the clinic with strong coordination with rescue and adoption groups and over 1,700 spay and neuter surgeries, overall intake has declined by 13.5% and the number of euthanized animals declined by 17%.

Animal Intake to Burlington Animal Services before and after opening the Spay and Neuter Clinic

Before: 8649 animals (2009)



After: 7461 animals (2010)

Solid Waste

Solid waste generated per person each year in Alamance County declined 12% over the past decade, an outcome of thoughtful waste reduction planning. In 2010, Alamance County produced 0.80 tons of municipal solid waste per person, twenty percent less than the statewide average (http://www.wastenotnc.org/swhome/AR09_10/AR09_10.pdf).

Alamance County Health Department responds to complaints related to illegal solid waste disposal. When violations of state or local solid waste regulations are found, clean-up and other remedies, including legal action, may be required. During the four-year period 2007-2010, there were 3,573 contacts related to solid waste, the majority of which began as complaints from the public. A few of these cases required legal action before they were resolved.

Alamance County's waste management plan involves removing metals and appliances, scrap tires and yard waste for recycling, and final disposal of waste in properly designed, constructed and managed landfills. Citizens have two legal options for disposal. Either curbside trash pickup or they must carry their trash to the landfill or other approved disposal sites. However, as complaints indicate many residents still dispose of waste in an unapproved manner that is detrimental to the environment and public health. Illegal dumps create human health risks by providing breeding places for insects, rodents and other vectors and pests. In addition, illegal disposal of waste results in financial losses.

Household hazardous wastes (HHW) are



25% of households dispose of their unused chemicals in the garbage, while 18.3% use community collection events and 5.5% don't know where to dispose of them.

2011 Elon University Poll

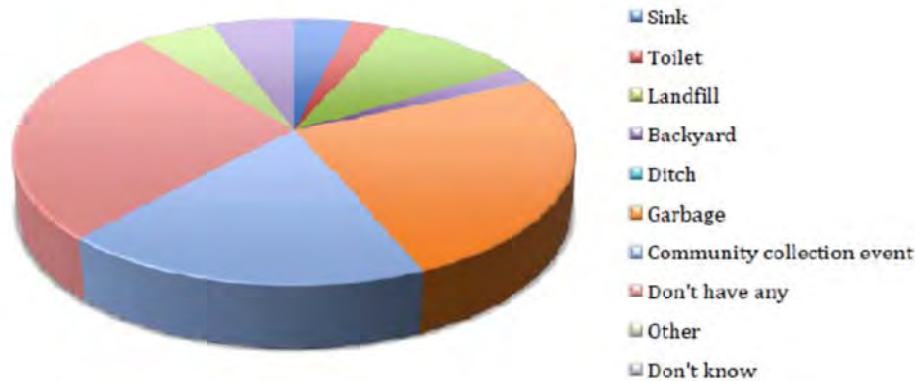
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hazardous household chemicals that are poisonous and/or toxic, ignitable, corrosive or reactive with other chemicals. HHW includes items such as pharmaceuticals, household cleaners, pesticides, herbicides, fertilizers, pool chemicals, paints, automotive fluids and batteries, among others. These chemicals are dangerous to human health and the environment. Alamance County has no permanent collection site, but continues to host "Paint and Pesticide" collection days to support the proper disposal of hazardous wastes. Because of positive reception by the community, these collection days became a semi-annual event in 2009 and are now held every fall and spring. According to household surveys, 18.3% of households dispose of their unused household chemicals at these community collection events.

Its importance was confirmed by the results of household surveys, which revealed that at least a third of households dispose of hazardous chemicals in the garbage, that two out of ten dispose of them in some other way, and that two out of ten do not know how they dispose of hazardous wastes. The amounts of solid, liquid, and aerosol pesticides collected have also increased steadily, and 1,150 pounds were collected at a recent event.

Household Disposal of Unused Chemicals in Alamance County



The Alamance County Landfill has made important progress in recent years. In September 2009, it began an electronics recycling program well ahead of the statewide ban on the disposal of electronics like computers and televisions with regular household trash that went into effect July 2011. These and other electronics are accepted for recycling at the Convenience Center located at the landfill. There is a nominal fee charged to cover handling expenses. The County promotes reuse and recycling to residents, business, and industries, including take back/buy back programs offered through manufacturers and local retail stores.

The Alamance County Landfill has also extended the expected lifetime of the landfill site from 40 years in 2005 to over 60 years in 2011. This has been achieved partially through the use of an alternative covering material that was implemented in 2010, requires the use of less soil, which takes up less space. Saving such valuable landfill space enhances the efficiency of Alamance

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County's Landfill and helps to ensure that the landfill can be used longer into the future. Further, despite the crippling of the national economy, the Alamance County Landfill has not changed its tipping fees for garbage received for over nine years. The landfill has been successful in improving its operations while stabilizing expenses for users and sparing tax dollars from landfill operations.

Air Quality

Alamance County's air quality has a direct impact on the respiratory health of its residents. Air pollution can make breathing difficult, cause eye irritation, and trigger asthma attacks. Polluted air may lead to more hospital emergency room visits and hospitalizations among asthmatics and others with compromised respiratory function. Increases in ambient air pollutants are associated with greater risk of death due to heart and lung conditions.

The Environmental Health Section continues to track the Air Quality Index (AQI), an index for reporting daily air quality. Triad Air Awareness reports a general trend of improving air quality in our part of the state, and attributes this to wise decisions about transportation, energy, and living more sustainably.

http://www.co.forsyth.nc.us/EnvAffairs/Air_awareness.aspx

The AQI tells you how clean or polluted our air is and identifies associated health effects. The AQI focuses on health effects residents may experience within a few hours or days after breathing polluted air. EPA calculates the AQI for five major air pollutants regulated by the Clean Air Act: ground-level ozone, particle pollution (also known as particulate matter), carbon monoxide, sulfur dioxide, and nitrogen dioxide. For each of these pollutants, EPA has established national air quality standards to protect public health. Ground-level ozone and airborne particles are the two pollutants that pose the greatest threat to human health in Alamance County.



1 in 5 respondents report riding with a coworker as a transportation option, and 53.6% have shared a ride with a friend.

2011 Elon University Poll

During the smog season of 2010 we saw Air Quality Index (AQI) numbers similar to those we experienced in 2008, with 12 days reaching an AQI of Code Orange (Unhealthy for Sensitive Groups) but no Code Red (Unhealthy) days. <http://www.ncair.org/monitor/aqi/>

In 2007, in an effort to raise awareness around the issue of air pollution and health and to protect the health, especially of children, the Health Department, in association with the Healthy Alamance Child Asthma Coalition and the Environmental Protection Agency (EPA), implemented an Air Quality Flag Program with schools, some county offices and businesses. In 2010, the program was expanded to include magnets on all environmental health vehicles. The Air Quality Flag and Magnet Program uses multi-colored flags and magnets to indicate the outdoor air quality.

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Year	Orange	Red
2010	12	0
2009	1	0
2008	14	2
2007	8	0
2006	6	0
2005	4	0
2004	1	0
2003	6	1
2002	26	5

Source: www.ncair.com

Ozone levels have risen statewide due to increased traffic, industry, and warmer weather

Children, the elderly, and people with respiratory diseases or compromised immune systems are particularly susceptible to the effects of ozone, but otherwise healthy people are also affected.

(Source: NCENR. <http://www.enr.state.nc.us/>). Ozone levels vary depending on season, time of day and the locale. The primary constituent of smog, ozone forms when nitrogen oxides and volatile organic compounds are emitted into the air from gasoline vapors, chemical solvents, and fuel combustion. People with lung disease are at greater risk from exposure to ozone, while people with either lung disease or heart disease are at greater risk from exposure to particle pollution. As noted in the demographic section, more than one in ten Alamance County residents is elderly and one in four is children, so that nearly four in ten Alamance County residents are considered a sensitive population for ozone pollution. www.airnow.gov

Ongoing treatment of medical waste raised concerns about the air in Alamance County during the recent assessment period. The NC Division of Air Quality renewed the air permit for Stericycle Inc. in February 2011 to allow the company's incineration facility to continue to operate its pollution-control devices in the two dual-chamber medical waste incinerators it uses to burn hospital, medical and infectious waste. The renewal followed months of public hearings and comment. Under conditions of the permit, Stericycle must demonstrate that it can comply with state and federal rules for controlling particulate matter, carbon monoxide, dioxin, furans, hydrogen chloride, sulfur dioxide, nitrogen dioxide, lead, cadmium, mercury and toxic air pollutants. The plant will be using scrubbers as its primary air pollution control devices, and the permit would not increase the plant's capacity. The NC Environmental Management Commission adopted rules in November 2010 that make new federal clean air requirements enforceable beginning on July 1, 2013 instead of Oct. 6, 2014.

Water Quality

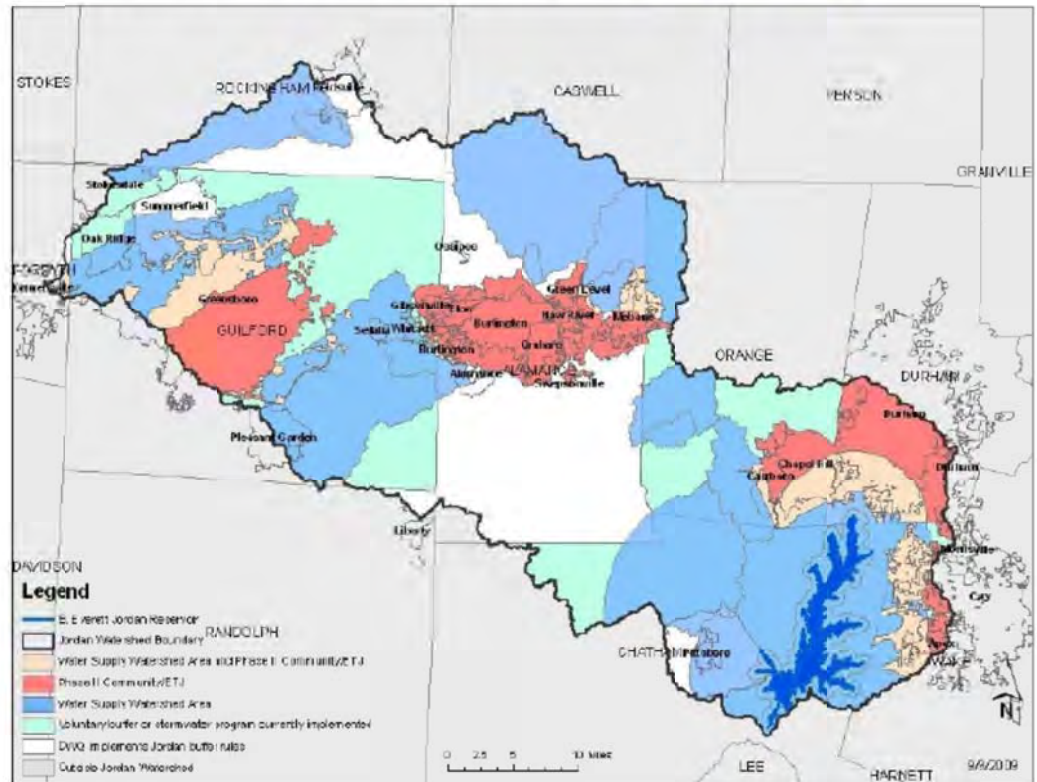
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Alamance County contains a portion of the Haw River and Deep River watersheds, nutrient sensitive waters which have been associated with nutrient-related algal blooms and fish kills. The County lies within the Cape Fear River Basin, the longest in the state stretching over 9,000 square miles from the Piedmont to the coast.

The main stressors to surface and ground waters in Alamance County are from nonpoint sources. Nonpoint pollutants include sediment run-off from improperly managed agricultural, construction, and logging sites as well as bacteria and nutrients from livestock, fertilizers, herbicides, insecticides, oil, grease, toxic chemicals, pet wastes, and faulty septic systems. During the years 2007-2010, ACHD provided 9,014 on-site septic system services, including new, existing, and repair permits for sanitary disposal and treatment of wastewater.

The Jordan Lake Nutrient Management Strategy became effective August 11, 2009. These rules, aimed at restoring and maintaining water quality, draw attention to private landowners' potential contributions to water quality impairments from nonpoint sources. www.jordan.lake.org.



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There are 132 active community drinking water systems in Alamance County. These range from large systems like the City of Burlington, which serves over 52,000 people, to very small systems like those that serve mobile home parks and daycare centers. Approximately half of households, businesses, and shared facilities rely on well water outside of these managed community water systems.

During the assessment period 2007-2010, Registered Environmental Health Specialists issued permits for 914 new or replacement wells, inspected the grouting of 803 wells, oversaw proper abandonment of unused wells, and provided field, phone, and office consultation to the public on water supply concerns. Environmental Health specialists collected more than 3500 water samples from private drinking water wells and provided these results with education to homeowners regarding water quality issues.

Operation Medicine Drop is a take back initiative that is part of a grassroots effort working on medication disposal. By providing safe and secure ways for people to get rid of unwanted medications, Operation Medicine Drop helps prevent accidental poisonings and drug abuse while protecting our waters. Local collection days are organized by our Safe Kids Coalition. In two days in Burlington and Graham in March 2011, 39,338 dosage units were collected for safe disposal.



23.5% of Alamance County residents dispose of unused medication in the toilet. As for household chemicals, 6.3% of people have flushed them down the sink or toilet, and 5.5% do not know where to dispose of them.

2011 Elon University Poll

Local and regional citizen groups remain active in protecting water quality for human and ecological health. The Haw River Assembly hosts regular and special events and releases publications to educate citizens about the recreational, scenic, and ecological importance of the river, including a Haw River Watch project and a Stream Steward Project that involves grassroots monitoring of watershed health. <http://www.hawriver.org>

Food Safety

Foodborne illness is a costly yet preventable public health problem. The Centers for Disease Control and Prevention estimates one in six people becomes ill from eating or drinking contaminated food every year. ACHD's Environmental Health Section conducted risk-based inspections of more than 8400 food and lodging establishments through the years 2007-2010. Current inspection results are available online at <http://www.alamance-nc.com/d/environmental-health/food-lodging-and-institutions/sanitation-grades.html>.

Environmental Health Specialists also investigated 313 complaints in food and lodging establishments, some of which were associated with illness. Norovirus was a common cause of outbreaks in long-term care facilities, schools, restaurants, and other settings during the assessment period. As part of every epidemiological investigation in an outbreak or suspected outbreak, ACHD advises consumers and the general public on control measures to reduce transmission of the pathogen. A nationwide *Salmonella* outbreak in 2008 and 2009 was linked to peanut products from the Peanut Corporation of America (PCA) and showed the complexity of

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the food system. ACHD staff was sent out to traceback and educate consumers about the recalled product. The ultimate cause of the contamination was never ascertained. This outbreak contributed to new food safety efforts nationwide. In 2010, Alamance County Environmental Health enrolled in the FDA's Voluntary National Retail Food Regulatory Program Standards. These standards reinforce proper sanitation (good retail practices) while focusing on the factors that cause and contribute to foodborne illness. Alamance County retail food managers took advantage of opportunities each spring and fall to earn food safety certification through ServSafe courses hosted by the County.

Public Health Preparedness

Local public health actively prepares for and responds to emergencies of all kinds by focusing on capabilities needed to protect and saves lives.

This assessment period was characterized by the first pandemic flu in a generation. Public health provided essential functions in emergency operations with a unified command of partners, surveillance and laboratory testing, mass vaccination, and public information in a response that lasted a year. With government and nongovernmental partners, we educate residents, businesses, and community groups on ways to prepare for and stay safe during an emergency.



37% of Alamance County residents said in a community disaster or emergency, they could take care of themselves for up to one week at home. One in five residents know they would need assistance within the first 3 days.

2011 Elon University Poll

Each year Alamance County fire departments respond to approximately 130 domestic and residential fires*.

- Over 300 individuals are affected by loss of housing, loss of property, and loss of food.
- Less than 50% of these victims have home owners or renters insurance to cover the loss.
- Approximately 40% of victims request immediate on-site financial assistance for temporary housing needs, clothing, and food assistance.
- The local chapter of the American Red Cross is the only non-profit agency in Alamance County that is prepared to respond and offer needed assistance.

3-Year Chart of Domestic/Residential Fires in Alamance County*

Area	2008	2009	2010
City of Burlington	56	65	60
City of Graham	11	10	11
Remainder of Alamance County	51	64	61

* data provided by local fire departments, internal statistics.

Each year approximately 40% of domestic fire calls are to families and individuals who request some type on-site financial assistance (food, clothing, shelter).

3-Year chart of Aid Requests from fire victims in Alamance County*

	2008	2009	2010
Requests for Emergency Assistance	41	66	51
Number of Individuals assisted	134	171	163

* data provided by American Red Cross, Piedmont Carolina Chapter

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Victims of residential fires and other natural disasters will experience a 3-5 day window of need in which temporary housing, clothing replacement, and food assistance will be critical. In addition, some residents will require replacement medications and mental health assistance to recover from the trauma of loss.

Insurance programs designed to assist home owners and renters with disaster recovery are ideal, but approximately 50% of those affected by disaster have no insurance.

*Chart of requests for basic needs assistance after a single-unit disaster**

	2008	2009	2010
Temporary Housing Assistance	68%	74%	72%
Clothing replacement	65%	70%	70%
Food assistance	48%	57%	51%
Household property replacement	36%	38%	49%
Medical assistance	4%	2%	6%
Mental health assistance	0	0	2%

** data provided by American Red Cross, Piedmont Carolina Chapter*

The Local Emergency Planning Committee encourages and supports local businesses, families, and individuals to have a disaster plan and an emergency supply kit. There are also a wide variety of helpful guides available at www.ready.gov.

The report contains information on rabies, solid waste, air quality, food safety, water quality and public health preparedness and contains data obtained from the telephone survey conducted by Elon University. There was discussion regarding the results of 92% of those surveyed reported their pet's rabies vaccination is up-to-date. Many local veterinarians send reminder cards to pet owners and Dr. Houser, who provides vaccinations at the clinics held at Environmental Health, sends reminder cards for those pets he vaccinates. Also included in the Assessment is shelter data and data from the spay/neuter clinic. Mr. Carroll encouraged the committee to attend the Community Health Assessment Forum, being held on October 6, 2011. There is a morning session and an evening session.

Health Director's Update

Ms. Janna Elliott provided the Health Director's update in Mr. Barry Bass' absence.

Ms. Elliott provided information regarding the Project LAUNCH (Linking Actions to Unmet Needs in Children's Health) grant submission. The commissioners approved applying for this grant in their meeting on September 19, 2011. The Division of Public Health approached Alamance County regarding its interest in development this program in the community based upon the success of the Early Childhood System of Care already established. The initial primary focus of the program is to engage pediatric primary care practices by stationing a behavioral health specialist and family advocate to assure that children from birth to age eight, at-risk for behavioral health issues, have access to appropriate behavioral health services. Project LAUNCH is based upon the public health preventive services model with an emphasis on positive parenting. Should Alamance County be chosen for this project, it will be the only one of its kind in North Carolina and one of twenty-six in the

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country. The potential funding allocation available would be approximately \$450,000 per year for the next three years, depending upon funding availability.

Ms. Elliott informed the committee that LME is in the process of moving to a new location on South Church Street. Piedmont Behavioral Health and contracted with Triumph to run the Crisis Center, which is moving into what is currently the Health Education Building. Health Education staff are moving to the fourth floor of the Human Services Building. The tentative plan is for DSS to move from the first floor once LME has completely vacated and the Health Department will acquire the entire first floor.

Ms. Elliott reminded the committee that the reaccreditation site visitors will be here beginning the afternoon of October 3, 2011, through the afternoon of October 5, 2011. Two Board of Health members will be interviewed on Tuesday, October 4, 2011. Dr. Donald Courtney will be contacted with a time, preferably in the afternoon, to come to for the interview.

Adjournment

With no further business, the meeting adjourned at 12:31 pm.

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

VI. Environmental Health Update

Mr. Carroll updated the board on Environmental Health's revenue. For the first three months of the current fiscal year, July, August and September of 2011, Environmental Health's revenue collections are only \$3,000 below the quarterly budget. This time last year, collections were \$12,000 below the quarterly budget.

Mr. Carroll reported that Dr. Houser has vaccinated 511 animals through health department organized clinics in 2011 and the adoption center has vaccinated more than 600 animals in clinic held at that facility organized by Burlington Animal Control. This does not include clinics held at local veterinarian offices. Six veterinary offices will hold rabies clinics during the week of November 7 -12. There have been no documented rabies cases since the previous meeting; however, recently a child was attacked by a fox which got away. The child was treated with post exposure prophylaxis.

Mr. Carroll stated he emailed the letter mentioned in the Environmental Health Committee minutes to seventeen local veterinarian practices. Mr. Carroll clarified that the law, in regards to rabies clinics, uses the term organize instead of sponsor. Mr. Carroll read from the statute (130A-187): *"The local health director shall organize or assist other county departments to organize at least one countywide rabies vaccination clinic per year for the purpose of vaccinating animals required to be vaccinated under this Part."* Mr. Carroll's letter asked if each veterinarian would participate in rabies clinics if the fee was increased from \$5.00 to \$10.00. Mr. Carroll received five responses: Dr. Houser said he will continue to do four clinics each year; Mebane Veterinary Hospital said they will continue to participate in the future regardless of price; Plaza Veterinary Hospital said they have been holding clinics during the same two weeks for \$10.00 and would participate if the fee was increased; Stoney Creek Veterinary Hospital stated that the week-long clinics were difficult and he would be willing to participate in a clinic on a Saturday at a location in the county; Dr. Marklin stated she was supportive of the discounted price but was concerned about the loss of revenue because her clients would most likely pay the regular price if she did not offer the discounted fee; she stated if the price was increased, she would participate twice a year on Saturdays. Board members discussed why rabies clinics fall under the Health Department's purview. It was suggested to offer media exposure for those that want to do clinics above the \$5. Currently, the Health Department organizes at least two clinics per year at the Environmental Health Office as well as two week-long clinics. Two clinics were also held out in the county during the evening with the help of Dr. Houser this year.

A motion was made by Dr. Michael Blocker not to request an increased fee for Health Department organized rabies clinics. The motion was seconded by Ms. Lynda Puckett and approved unanimously by the board.

VII. Personal Health Committee Update

Dr. Kathleen Shapley-Quinn provided the committee with a summary of the minutes from the September 20, 2011, Personal Health Committee meeting.

Alamance County Board of Health

Personal Health Committee

The Personal Health Committee met on Tuesday, September 20, 2011, at 6:00 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: Mr. Kent Tapscott, Chairman; Dr. Kary Dodd; Ms. Lynda Puckett; Mr. Charles Wilson.

The following staff members were present: Ms. Michele Herbek, Dr. Kathleen Shapley-Quinn, Ms. Gayle Shoffner and Ms. Janna Elliott.

Call to Order

Chairman Kent Tapscott called the meeting to order at 6:08 pm.

WIC Update

Ms. Michele Herbek provided the committee with the WIC Report for August 2011.

WIC

Departmental Monthly Report

August 2011

Clinic Activities:

1307 Clinical Nutrition contacts provided by Nutritionist

544 Hemoglobin's done in WIC

336 Nutrition Education lessons provided by WIC Clerical

Most recent report of dollar amount of WIC vouchers redeemed in Alamance County \$57,126.43 Number Food Vouchers redeemed - 11,680

Clinic show rate - 84% (560 appointments kept / 1336 appointments scheduled 265 patients seen from other Health Dept. Clinics)

Clinic profile: 4416 or 98% of assigned caseload 4517

Racial Ethnic composition of caseload- 38% White- Black 23% - Hispanic 36% < 1% Asian.

Grocery Store Bulletin board

WIC Staff Meeting 8/3/2011 & 8/29/11

Vendor Stores monitored - 8 stores

Child Nutrition for Child Care Settings presented by Michele Herbek on 8/18

Infant Feeding Class - 8/3, 8/4, 8/17, 8/18

Breastfeeding Café - 8/5

Breastfeeding Peer Counselor Caseload (BFPC) 504 by 8/31/11

BFPC Quarterly Update in Raleigh attended by Naomi Garcia, Lorena Gomez, Courtnie Carter and Catherine Cunningham on 8/31

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BFPC Home Visits – 11

WHO Growth Chart Training attended by Michele Herbek, Nicole Alston, Donna Dotson, Pandora Oliver, Catherine Cunningham and Candace Jeffries on 8/23, 8/25, 8/26.

University of Albany School of Public Health Breastfeeding Grand Rounds viewed by Michele Herbek on 8/4

NCWA conference call on 8/12 – Michele Herbek

Pediatric Committee Meeting on 8/10 – Michele Herbek & Nicole Alston

Saturday Clinic 8/20 – 75% show rate

MNT – 9

MNT meeting with ACHD nursing and providers on 8/15 – Michele Herbek & Nicole Alston

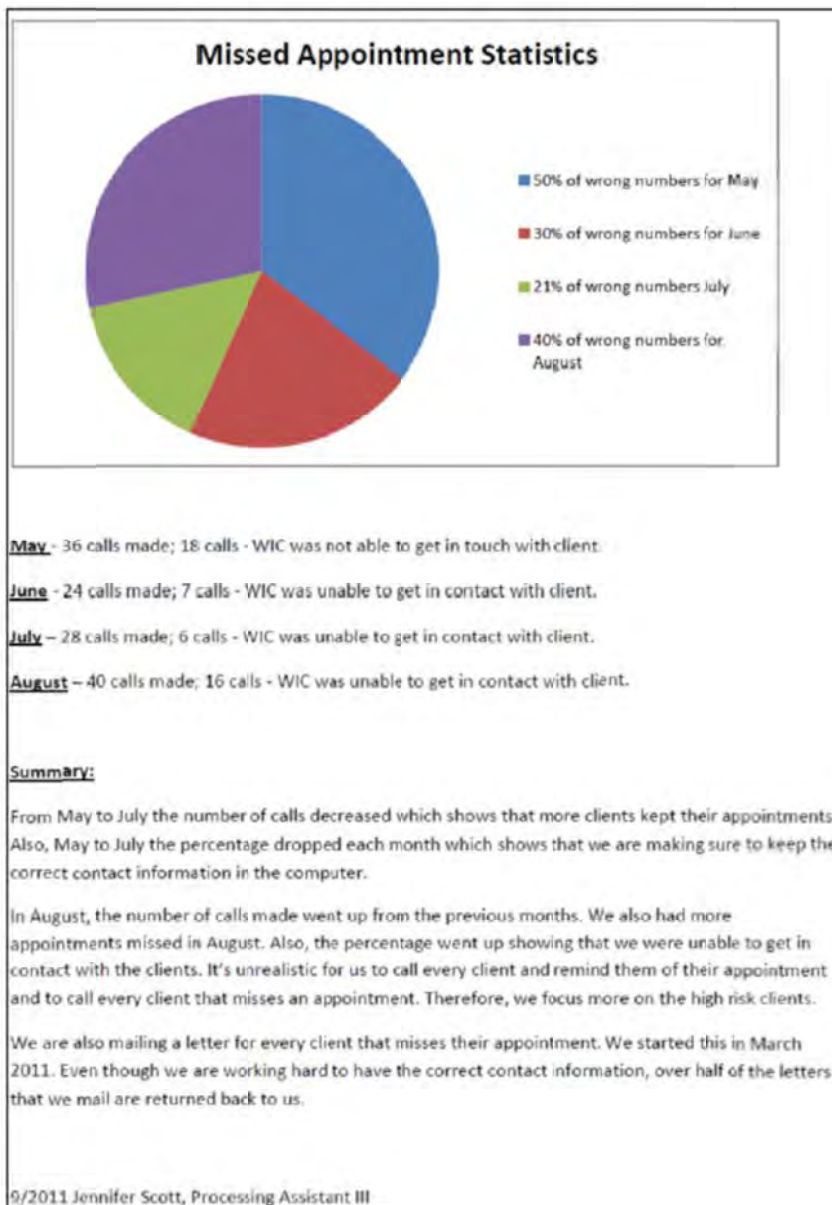
Submitted by: Michele Herbek and Robin Robertson

Ms. Herbek reported that the two part-time Breastfeeding Peer Counselors were increased to full-time on September 1, 2011.

Ms. Herbek also provided the committee with information regarding missed appointments for high-risk clients.

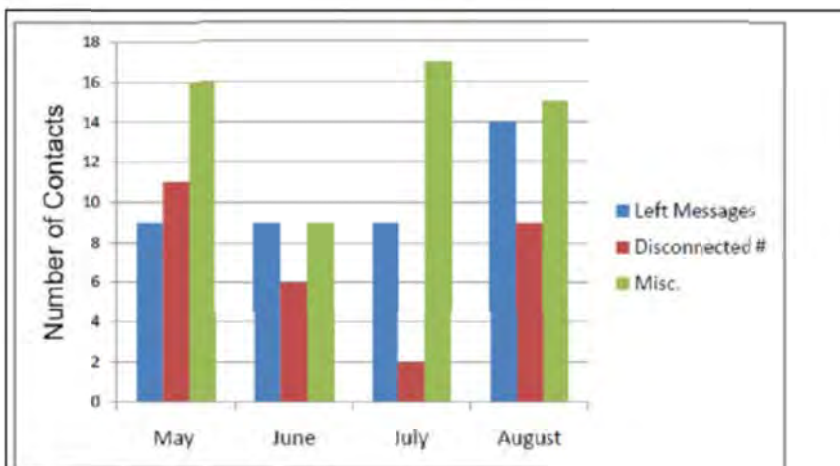
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May – LM: 9; Disconnected: 11; Misc: 16

June – LM: 9; Disconnected: 6; Misc: 9

July – LM: 9; Disconnected: 2; Misc: 17

August – LM: 14; Disconnected: 9; Misc: 15

Summary

This graph compares the reasons why clients miss their appointments. Miscellaneous contains the following reasons: forgot, had another appointment to attend, car trouble etc. This graph also shows that the number of disconnected phone numbers dropped from May to July but then increased again in August.

9/2011 Jennifer Scott, Processing Assistant III

Ms. Herbek stated that WIC Program policy dictates that letters be mailed to clients who miss appointments if caseload falls below 97%. WIC will continue to call clients who miss appointments and may continue to send letters. Dr. Dodd inquired about the increase in number of missed appointments for August. There was no known reason for the increase. Mr. Tapscott inquired how contact information was verified at each appointment and suggested asking the client to provide their information instead of reading the information aloud and asking them to verify. Dr. Dodd inquired about the number of clients missing multiple appointments. Ms. Herbek will check with the nutritionists to gather this data. Ms. Herbek stated the staff will

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give clients pocket 2012 calendars and ask the clients to use them to record WIC appointments.

Personal Health Update

Ms. Gayle Shoffner informed the committee that the immunization clinic is currently providing a "fast track" check-in and walk-in appointment system for students nearing the deadline for vaccine requirements and needing only Tdap vaccines. From August 19, 2011, to present, 135 doses have been given. Immunization clinic is continuing to offer free Tdap vaccines to adults 19 and older who are underinsured and meet 200% of the federal poverty level. This is made possible by a program sponsored by Sanofi Pasteur called the "gift program." Three hundred doses of the approved 1,200 doses in this program have been received.

Ms. Shoffner reported that seasonal flu vaccine has been received. Mr. Bass proposed a \$20.00 fee for insured clients, which is the same as last year. The criteria for state supplied free flu vaccine are for a child age three months to eighteen years: Medicaid, no insurance, underinsured, college student (regardless of insurance status); for age nineteen and older: Medicaid, Medicare part B, Health care workers (regardless of insurance status). Non-insured or underinsured adults will be charged \$20.00. Ms. Shoffner reported that Medicaid reimbursement rate for pneumonia vaccine increased to \$31.53. Mr. Bass proposed a fee of \$35.00 for insured clients. Both rates for flu and pneumonia still do not include the cost of administrative fee so it will be as affordable to the public as possible. Immunization clinic began offering seasonal flu vaccine to the public on August 19, 2011.

Ms. Shoffner stated the state audit for family planning, maternity and postpartum home visits will occur on September 28, 2011. Ms. Patricia Horton, the regional nurse consultant, will be in the agency that day.

Ms. Shoffner provided the Women's Health and STD Clinic report.

Alameda County Health Department														
Women's Health/STD Clinic														
Month/Year	Total Visits Completed	# Depo given	Total Visits STD Clinic	STD clinic visits by sex	STD visits by race & sex									
				Females	Males	Asian F	Asian M	Black F	Black M	Hispanic F	Hispanic M	White F	White M	Other F
Jan-11	458	179	250	140	110	0	0	72	50	10	11	54	34	4
Feb-11	417	163	235	138	97	0	0	71	46	11	20	50	29	0
Mar-11	514	0	272	160	113	0	0	86	80	11	9	69	42	0
Apr-11	426	0	230	132	98	0	0	70	56	8	14	29	27	0
May-11	492	0	304	198	106	2	0	108	60	10	8	78	35	0
Jun-11	460	0	296	178	118	1	0	93	59	18	15	64	47	0
Jul-11	440	0	300	180	118	2	0	91	50	14	14	70	34	0
Aug-11														
Sep-11														
Oct-11														
Nov-11														
Dec-11														
TOTAL	3859	342	7881	4132	3750	3	0	505	410	30	31	429	250	0
*monthly depo stats no longer being tracked on this report														
Pregnancy Test Clinic														
Month/Year	Total	PT's completed		All Positive PT's to receive care at ACHD				PT's completed under age 17						
		Negatives	Positives	Total	% of total Pos	Teens	Non-Teens	Total	Negatives	Positives				
Jan-11	70	11	59	41	69%	3	38	3	0	3				
Feb-11	70	9	61	31	51%	6	25	6	0	5				
Mar-11	80	12	68	41	60%	2	39	5	4	1				
Apr-11	80	11	69	39	56%	1	38	5	2	3				
May-11	93	13	80	59	63%	5	54	10	2	8				
Jun-11	81	7	74	56	75%	4	52	5	1	4				
Jul-11	70	15	55	34	62%	1	33	7	4	3				
Aug-11	89	14	75	38	51%	1	37	3	0	3				
Sep-11														
Oct-11														
Nov-11														
Dec-11														

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Medical Director's Update

Dr. Kathleen Shapley-Quinn stated that the re-accreditation process is providing opportunity to think about how decision making occurs within the Health Department; particularly, if the Board of Health is providing input before decisions are made or if the Board of Health would prefer to know once decisions are made. For example, a \$5,000 grant was recently awarded for the CenteringPregnancy® program, so it would be hard to turn it down at this point. For the future, it would be helpful to know how the Board wants management staff to approach things such as this.

Mr. Tapscott submitted a question via email prior to this meeting inquiring if the Health Department has ever looked into the NC Diabetes Prevention and Control Program. Mr. Tapscott discussed that it would be great to have an initiative that is applicable to a larger group. Statistics show that 20% of individuals over age 65 have diabetes. Those individuals qualify for Medicare Part B. There are common protocols available and inexpensive medications which most individuals could afford. Mr. Tapscott suggested organizing walks, sending email newsletters, making PowerPoint presentations with simple instructions available over the website and conducting glucose screenings as a way to start. He would like to see ACHD reach out to larger groups as well as our more focused populations we are currently targeting. Dr. Shapley-Quinn and Ms. Herbek discussed a diabetes program that was researched for gestational diabetes, but it was not found to be feasible at the time. Dr. Shapley-Quinn also discussed the lack of primary care providers in Alamance County and the importance of having a physician to whom individuals could be referred with less than favorable glucose screening or hypertension results. Dr. Shapley-Quinn will determine which staff member is on the Chronic Disease Prevention Taskforce and refer Mr. Tapscott's suggestions to that individual. Healthy Alamance, coordinated by Ms. April Durr, may be the appropriate starting point for an initiative such as this. Mr. Tapscott would like to provide easy to follow diabetes care instructions for the public. He would like to see the Health Department focus on ways to impact larger populations.

Dr. Shapley-Quinn informed the committee that she was approached by Dr. David Johnson with Burlington Pediatrics about providing primary care to uninsured infants. There is an underserved population. This was not included in the strategic plan, so there is not a budget for this. Start-up costs are unknown at this time. There are gaps in the clinic schedules at this time, so it would be possible to see more patients. Personal Health Committee members discussed pros and cons including general recognition of need to provide service to underserved when financially feasible. They requested Dr. Shapley-Quinn with seek guidance from Jean Vulkerson, Child Health Consultant, and pursue a cost benefit analysis of beginning this service.

Dr. Shapley-Quinn discussed that Project LAUNCH recognizes multiple domains necessary for the cradle to career continuum including mental, social, emotional, physical, and educational health. One of these areas, education, is minimally

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targeted within traditional health. Dr. Shapley-Quinn proposed to develop a language and literacy rich environment for the 0-5 year old kids in multiple sites at the Health Department including WIC, Dental and personal health clinics. She would like to create literacy rich waiting rooms with books to take home, drawing materials and DVDs with people reading children's stories. The Health Department could utilize a volunteer program with readers, storytellers and folks to encourage discussion with children, a foundation of strong literacy. Involve parents in reading to kids in waiting rooms as much as possible and educate staff on the power they have to impact educational outcomes through evidence based Reach Out and Read program. The project LAUNCH grant incorporates budgeting for this approach as the "education" arm of the grant. Personal health committee members expressed support for this effort.

Dr. Shapley-Quinn discussed improving parenting and decreasing stress and integrating this effort into CenteringPregnancy®. Many of the Health Department's pregnant patients have many challenges socially, emotionally and mentally. Pregnant women with mental and emotional health needs often do not seek care from mental health providers. An improvement came about with embedded mental health services. Services were easier to access, but still women, for whatever reasons did not regularly access these services. Another method to improve this is to include mental and emotional health skill training within our CenteringPregnancy® program. Dr. Shapley-Quinn proposed to integrate life and coping skills into CenteringPregnancy® using skill training found in the a form of therapy called dialectical behavior therapy or DBT. This model has been effective in folks with BPD, ADHD, depression, bulimia, incarcerated women, and women with substance abuse behaviors. It takes four different areas and teaches particular skills: mindfulness is about how to focus one's attention to the present moment; Interpersonal Effectiveness is about improving one's communication skills; Emotion Regulation is about managing one's emotions effectively; and Distress Tolerance is about surviving a crisis without making it worse. A \$5,000 grant was awarded to help certain staff learn these skills, and learn how to teach them. Training by a DBT expert will take place over the next couple months, and she will also assist with working with our CenteringPregnancy® groups that will start in December for training within the CenteringPregnancy® context.

Dr. Shapley-Quinn stated that the CenteringPregnancy® program has applied for Accreditation and will undergo a site visit September 22 and 23, 2011, to determine if the Health Department's program will receive accreditation.

Health Director's Update

Ms. Janna Elliott provided the Health Director's update in Mr. Barry Bass' absence.

Ms. Elliott provided information regarding the Project LAUNCH (Linking Actions to Unmet Needs in Children's Health) grant submission. The Division of Public Health approached Alamance County regarding its interest in development this program in the community based upon the success of the Early Childhood System of Care already established. The proposal allows the community to build on the conveyor

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belt vision of family services from cradle to career utilizing a System of Care model. Triple P will be the evidence based practice that is implemented. Implementation will meet a gap in services including need for expanded home visitation programming that supports parents. The Family Support position will engage families and provide care management, service planning and entry into social and emotional services and supports for families, such as Incredible Years, PAT, etc. The embedded Early Childhood Mental Health provider will provide linkage from primary care to emotional care thereby reducing the number of children that may be lost in the traditional system referral process which does not utilize a "warm handoff." The initial primary focus of the program is to engage pediatric primary care practices by stationing a behavioral health specialist and family advocate to assure that children from birth to age eight, at-risk for behavioral health issues, have access to appropriate behavioral health services. Project LAUNCH is based upon the public health preventive services model with an emphasis on positive parenting. Should Alamance County be chosen for this project, it will be the only one of its kind in North Carolina and one of twenty-six in the country. The potential funding allocation available would be approximately \$450,000 per year for the next three years, depending upon funding availability. The commissioners approved applying for this grant in their meeting on September 19, 2011.

Ms. Elliott informed the committee that LME is in the process of moving to a new location on South Church Street. Piedmont Behavioral Health and contracted with Triumph to run the Crisis Center, which is moving into what is currently the Health Education Building. Health Education staff are moving to the fourth floor of the Human Services Building. The tentative plan is for DSS to move from the first floor once LME has completely vacated and the Health Department will acquire the entire first floor.

Ms. Elliott reminded the committee that the reaccreditation site visitors will be here beginning the afternoon of October 3, 2011, through the afternoon of October 5, 2011. Two Board of Health members will be interviewed on Tuesday, October 4, 2011.

Adjournment

With no further business, the meeting adjourned at 7:31 pm.

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

VIII. Medical Director's Report

Dr. Shapley-Quinn reported that Alamance County Health Department has received a \$5,000 grant to expand the CenteringPregnancy® program to include skills training for pregnant women. Specifically, this training will focus on teaching how to reduce stress and improve communication between parents. In terms of outcomes for children, these two areas make a significant difference in how a child will function emotionally, physically and educationally.

Dr. Shapley-Quinn discussed Mr. Tapscott's question from the September 2011 Personal Health Committee meeting about where the health department is going and how decisions are made regarding areas of focus. Issues regarding family planning, STDs, communicable disease and prenatal care are often the focus. In Mr. Tapscott's own work, part of what he does is diabetes management in conjunction with a family physician in town. He brought up a point that there are a lot of very practical, low-cost things that can be done to improve diabetes care. He was bringing this up as a larger question: why is there not more emphasis on cardiovascular disease or smoking cessation in the community at large? At the end of that conversation, the plan was to contact April Durr and ask her to come speak to the board. The health department has limited funds and limited ability to do things; however there is a significant ability to partner with organizations and community groups and that is done through the health education department, the Alliance and the Healthy Alamance taskforce. While these topics don't often come to the Board of Health, things are happening with the community partners and efforts will be made to keep the Board of Health informed about this. Ms. Kathleen Colville wondered about where Health Education is represented in the structure of the board, because Health Education is neither a part of the Personal Health Committee nor the Environmental Health Committee. Dr. Blocker discussed that the health department is mandated to physically conduct some activities and other activities that are not mandated can also be conducted at the health department level or through community partnerships. The health department does not provide diabetes patient care in the health department, but can be helpful to the other institutions in the county with initiatives for diabetes care. Within the mandates of what the strategic plan says, the board does not want to be involved with the management of how goals are achieved. The board does need to know the financial aspects of it, because they are responsible for the budget portion. Ms. Colville requested a presentation on the Community Health Assessment when it is complete. Mr. Wilson requested an update on the strategic plan at least annually or when priorities are updated. Dr. Shapley-Quinn also suggested that the board receive a presentation on the three major causes of death in Alamance County.

Dr. Shapley-Quinn stated that she spoke with Dr. David Johnson several months ago regarding the health department implementing a primary care

pediatric clinic. There was discussion at the September Personal Health Committee meeting and the overall discussion resulted in two points: the lack of funds to undertake this clinic and determining how many underserved children are in Alamance County. The recommendation was to create a service plan to determine the feasibility of this within the health department. After a subsequent conversation with Dr. Johnson to determine who admitting physicians would be, Dr. Johnson wanted to speak with local pediatricians before moving forward. Dr. Blocker suggested ensuring that the local physicians would understand this means admitting all of the uninsured patients as well. Also, Dr. Blocker stated that this would mean the Health Department would become an option for all children in the area, not just the uninsured and Medicaid insured. This would mean the health department would take on privately insured patients, thus potentially taking business from local pediatric offices. Dr. Blocker stated that Alamance Regional Medical Center (ARMC) is involved in a long-term recruitment process for physicians and have analyzed the community needs for physicians. Dr. Blocker suggested speaking with Bob Byrd with ARMC to find out what their analysis has shown for pediatric needs in the area and to determine if ARMC has plans in place to fill the potential void.

Dr. Shapley-Quinn discussed an educational component of Project LAUNCH and how the Reach Out and Read program could be integrated. Currently, the health department gives a new unused book to each child health visit. A grant obtained by the Alamance Partnership for Children allowed for the creation of a DVD of Alamance County professionals reading children's books. This DVD will be shown in waiting rooms in the health department and in other locations throughout the county. Ms. Linda Massey commented that the museum in Haw River has a program in which they read to children.

The CenteringPregnancy® program recently underwent a site visit for accreditation purposes. It is likely the health department will receive conditional accreditation initially, pending a few changes such as a dedicated space and continual recruitment and scheduling.

IX. Personal Health Update

Ms. Gayle Shoffner reported the health department offered "fast track" Tdap vaccines to area 6th graders nearing the out of compliance time frame for exclusion from school from August 19 through September 30, 2011. A total of 209 Tdap vaccines were provided to area out of compliant students. This was in addition to the normally scheduled Immunization clinic patients.

Ms. Shoffner provided an update on the seasonal flu vaccine. Children between 3 months and 18 years of age who have Medicaid, no insurance or are underinsured, college students regardless of insurance status, and health care workers regardless of insurance status all qualify for the state supplied free

vaccine. For adults age 19 and older, the health department will bill for Medicaid and Medicare Part B insured. The proposed \$20.00 fee, which is the same as last year, will be applied to adults with private insurance, no insurance or who are under insured. Rates for flu still do not include an administrative fee. The health department began offering seasonal flu vaccine to the public on September 19, 2011, and has given a total of 434 doses; 155 of those were given in the prenatal clinic.

Ms. Shoffner stated that Ms. Patricia Horton, Regional Nurse Consultant, completed program audits for family planning, maternity and postpartum home visits on September 28, 2011. There were a couple of out of compliance issues which have been addressed and resolved. Ms. Jodi Reber, Regional Communicable Disease Nurse, conducted a Communicable Disease/STD program review on October 10, 2011. She reviewed NCEDSS program reports with staff and will review the health department's program protocols electronically. A report of her findings is expected in November.

Ms. Shoffner discussed that the case management services transition plans for Care Coordination for Children (CC4C), formerly Child Service Coordination and Pregnancy Care Management (PCM), formerly Baby Love or Maternal Care Coordination, programs have been revised and submitted to the state for review. Program consultants along with Access Care staff visited the health department in August to assist with this process.

Ms. Shoffner reported that, in response to budget issues and in an attempt to bring in more patients, clinics have adjusted the pre-booked open access appointments by doubling-booking the available slots. The no-show rate for the pre-booked slots is 40%. Clerical and nursing staff has been apprised of the importance of increasing the number of patient visits as well as revenue. Schedule statistics will continue to be monitored and adjustments will be made as necessary to accommodate the public need.

X. Health Director's Report

Mr. Bass congratulated Dr. Kathleen Shapley-Quinn and Mr. Eric Nickens for each receiving Glaxo-Smith-Kline Public Health Staff Recognition awards at the recent North Carolina Public Health Association (NCPHA) meeting. Also, Mr. Bass congratulated Ms. Teresa Edwards on receiving an \$800 scholarship from NCPHA. Ms. Edwards is working towards a Masters Degree in Public Health at Walden University.

Mr. Bass reported that the health department's management team met with Dean Rimer from the Gillings School of Global Public Health and Dr. Anna Schenck from the Institute of Public Health on September 26, 2011. There was very good dialogue regarding the link between public health practice and academia.

Mr. Bass, Ms. Stacie Saunders, Commissioner Massey, Mr. Honeycutt and several DSS staff members met with students from the UNC School of Social Work on September 26, 2011. The discussion included the practice of human services in this community and Alamance County's experiences.

Mr. Bass stated that on September 28, 2011, he, along with Ms. Susan Osborn and Sheriff Johnson, gave a presentation to the Board of Commissioners, a delegation from the North Carolina Association of County Commissioners and a legislative delegation. Both State Representatives and our State Senator were present. This was a good opportunity to share information about Alamance County's human services with the elected officials.

Ms. Bass commended Ms. Kathleen Colville for her participation in World Breastfeeding Day.

XI. Old Business

A. Accreditation Report

Ms. Kathleen Brooks, Agency Accreditation Coordinator, provided an update on the status of the health department's accreditation.

**Alamance County Health Department Re-Accreditation Report
To the Board of Health**

The NC Public Health Accreditation Site Visitors were at Alamance County Health Department October 3-5th.

During this time they reviewed documentation/evidence, toured our facilities, talked with staff and interviewed key staff, county management (Craig Honeycutt), Board of Health members (Dr. Courtney & Kathy Colville) and community partners (Susan Osborne, April Durr & Alva Sizemore)

First of all the site visitors were so impressed with all aspects of our agency. They were very complimentary and had prepared a long list of strengths which include, but is not limited to, our staff, facilities, community collaborations and provision of services. (the complete list will be part of our formal re-accreditation report so I can share it with you at a later date).

Having said that, they are recommending "conditional accreditation" for the following reasons:

- One of the personnel records they randomly selected did not have a current signed and dated performance appraisal.
- The Environmental Health facility does not have a handicap accessible restroom (however we did provide an alternative which is located in the adjacent Ag Extension building).

The next step will be for the site visit team to provide us with a formal, written, report within 2 weeks time. We then have 10 days to respond/provide additional evidence at which time we will submit the signed/dated performance appraisal. The site visit team can then amend their original report and recommend "full accreditation" to the Accreditation Board.

All in all a very good outcome. We achieved 146 out of 148 activities met and 38 out of 41 benchmarks. This is outstanding and we all have much to be proud of.

On December 16th, Barry, Carl and I will travel to Raleigh to attend the Accreditation Board meeting. We fully anticipate that we will be awarded Full Accreditation at that time.

Thank you to all of you for your commitment, not only to this process, but to public health. We truly have an awesome group of professionals who are "Committed to Protecting and Improving the Public's Health in Alamance County.

Congratulations to all on a job well done!

There was discussion regarding the Environmental Health restroom. There has been no change in the Environmental Health building or location since the previous accreditation site visit in 2007.

Mr. Bass commended Mr. Carroll and Ms. Brooks for their hard work.

B. Project LAUNCH Update


Mr. Bass provided an update on the Project LAUNCH grant submission. Mr. Bass, Ms. Saunders, Mr. Gary Ander and Ms. Osborn are working

together to determine how this grant can best be implemented into Alamance County. There is an existing \$9,000,000 SAMHSA grant focusing on intervention. LAUNCH will focus on public health prevention. The state is the grantee of this project from the federal government. Guilford County tried unsuccessfully to implement this grant for the past two years. Alamance County was approached and encouraged to submit a proposal to continue the project. The grant submission included housing mental health professionals at local pediatric offices; however, the state prefers the program operate in manner that does not duplicate what the early childhood SAMHSA grant is already doing. Mr. Bass stated that multiple phone conferences and in-person meetings are taking place to determine a solution between what Alamance County needs and what the grantees expect. This is one of three public health based Project LAUNCH programs in the nation. It is a pilot in North Carolina, so outcomes will be measured regarding statewide implementation. The board guided Mr. Bass that if a compromise between Alamance County and the state grantees can be reached, continue with the project; however, if this grant will result in three years of frustration, respectfully decline the grant.

XII. New Business

A. Pneumonia Vaccine Fee Increase Request

Mr. Bass provided the board with a memo requesting to increase the pneumonia vaccine fee from \$30 to \$35.



ALAMANCE COUNTY
Health Department
319 North Graham-Hopedale Road Suite B
Burlington, NC 27217-2995
www.alamance-nc.com/d/health

Joseph B. Bass, Jr., MSW
Health Director


(336) 227-0101
FAX (336) 513-5593

To: Alamance County Board of Health
From: Barry Bass, Health Director
Date: October 18, 2011
Subject: Increased fee for Pneumonia vaccine


Please consider this request to increase the fee for Pneumonia vaccine from \$30.00 to \$35.00 for the 2011-2012 Senior Vaccine Season.

We plan to file Medicare and Medicaid and will collect \$35.00 from private pay clients.

Thank you for your consideration.



Alamance County Health Department
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A motion was made by Dr. Donald Courtney to approve pneumonia vaccine fee increase request as presented. The motion was seconded by Ms. Lynda Puckett and approved unanimously by the board.

B. Nomination Committee for Election of 2012 Officers

Dr. Blocker discussed that new officers will be elected at the December Board of Health meeting. Dr. Blocker, Mr. Charles Wilson and Mr. Michael Venable will serve as the Nomination Committee and will meet immediately following the October 18, 2011, Board of Health meeting.

C. Awards Committee for 2011 Award Recipients

Dr. Blocker discussed that the Employee of the Year Award and the Public Health Partnership Award will be awarded at the December Board of Health meeting. Dr. Blocker appointed the Environmental Health Committee as the Awards committee. Ms. Elliott will seek nominations from Health Department staff.

A motion was made by Ms. Kathleen Colville to accept the decision of award recipients as decided by the Awards Committee. The motion was seconded by Dr. Donald Courtney and approved unanimously by the board.

D. Board of Health Member Terms Expiring

Mr. Bass reported that the terms of three board members are expiring on December 31, 2011. Dr. Kary Dodd's, Mr. Chad Huffine's and Mr. Wilson's terms are all expiring. Mr. Wilson has served three consecutive three-year terms and is ineligible for reappointment. The board consented to asking Dr. Dodd and Mr. Huffine if they would consider reappointment for another term.

XIII. Other

Ms. Colville discussed that she and Dr. Donald Courtney were interviewed as part of the accreditation process. One of the discussion points during the interview involved board involvement and interaction with staff that do not attend Board of Health meetings. Ms. Colville requested the board be notified when the staff meeting will be held in December so that members may attend and interact with staff. The awards are also presented at this staff meeting.

XIV. Closed Session

The meeting went into closed session per N.C. General Statute 143-318.11 (a) (6) at 8:35 p.m. on a motion by Dr. Donald Courtney for the purpose of discussing a personnel issue. The motion was seconded by Ms. Kathleen Colville.

The closed session adjourned into open session at 8:47 p.m. on a motion by Dr. Donald Courtney and second by Ms. Kathleen Colville.

Dr. Michael Blocker announced that a personnel matter was conducted during the closed session.

A motion was made by Ms. Kathleen Colville to appoint Carl Carroll as the Interim Health Director if at any time Mr. Bass is not available to perform the duties of the Health Director. The motion was seconded by Dr. Donald Courtney and approved unanimously by the board.

XV. Adjournment

With no further action or discussion, the meeting adjourned at 8:50 p.m. on a motion by Ms. Kathleen Colville and second by Ms. Lynda Puckett.

ALAMANCE COUNTY BOARD OF HEALTH

Dr. Michael Blocker, Chairman

Mr. Joseph B. Bass, Jr., Secretary