



HOKE COUNTY
Department of Public Health

683 East Palmer Road
Raeford, North Carolina 28376



Helene Edwards, MS, RD, LDN
Health Director

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Hoke County Health Department
Board of Health
Agenda

Regular Meeting **Special Meeting**

October 24, 2016 at 7:00 PM
Conference Room

Call to Order	Vance McGougan, Chair
Approval of Meeting Agenda	Vance McGougan, Chair
Public Hearing: BOH Rule for Rabies Post-exposure Management of Dogs and Cats	Helene Edwards, Health Director Ralph Cecil, Animal Control Supervisor
Approval of Minutes • September 12, 2016	Vance McGougan, Chair
<u>Old Business</u> Update from BOCC Meetings	Helene Edwards, Health Director
<u>New Business</u> Role of HCHD Staff at Shelters DayMark Partnership Accreditation Update Clinical Programs Annual Review Administrative Update Clinical Update Health Director's Update BOH Member Term Expiration (1) Public Comments Closed Session Other Business Adjourn	Helene Edwards, Health Director Helene Edwards, Health Director Helene Edwards, Health Director Cindy Morton, Nursing Director Jenny McDuffie, Administrative Officer Cindy Morton, Nursing Director Helene Edwards, Health Director Vance McGougan, Chair



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Hoke County Board of Health Minutes

Regular Meeting **Special Meeting**
October 24, 2016 at 7:00 PM
Conference Room

I. Call to Order

The meeting convened at 7:04 PM with Vance McGougan, Chair presiding, and Helene Edwards, Secretary. Invocation was given by Mr. McGougan, Chair.

Members Present	Joe Alston, Joyce Beard, Suzanne Balfour, Vice Chair, Elizabeth Hodgins, Vance McGougan Chair, Jean Squier, Keith Walters, and Commissioner Robert Wright
Members Absent	Dr. Charles Allen, Patricia Crowder, and Lisa Lewis
Staff Members Present	Jenny McDuffie, Cindy Morton, RN, Beth Porreco, RN, and Cheryl Williams, RN
Others Present	Timesha Batchelor, Autum Benson, Janay Boykin, Shakema Carr, Ralph Cecil (Animal Control Director), Michael Doss, Jasmine Newby, and Morgan Shook

Quorum: Yes

II. Approval of Meeting Agenda

Motion made by Mr. Keith Walters and seconded by Commissioner Robert Wright to approve the **October 24, 2016** Board of Health meeting agenda. **Motion carried unanimously.**

III. Public Hearing

Board of Health Rule for Rabies Post-exposure Management of Dogs and Cats

The proposed Board of Health rule for rabies post-exposure management of dogs and cats implements and particularizes the authority given to the local health director in North Carolina General Statute §130A-197 to effectively and efficiently protect the public's health utilizing the most current science.

Accordingly, the Hoke County Board of Health adopts the recommendations and guidelines for rabies post-exposure management of dogs and cats specified by the National Association of State Public Health Veterinarians in the 2016 edition of the Compendium of Animal Rabies Prevention and Control (Part I. Rabies Prevention and Control; B. Prevention and control methods in domestic and confined animals. and 5. Post-exposure Management). These provisions of the Compendium shall be the required control measures pursuant to N.C.G.S. §130A-197.

- Mr. Ralph Cecil, Animal Control Director, summarized the proposed rule to the Board of Health. He stated that the main change would be the reduction of the quarantine time to 4 months from 6 months for the unvaccinated dog or cat. This change would save the owner \$1200.00.
- Also, if the rabies vaccination status is *overdue with the appropriate documentation of prior rabies vaccination*, under the 2016 the Compendium Control measure the pet will receive immediate veterinary care with rabies booster dose within 96 hours of exposure, the owner keeps the pet under observation for 45 days (\$25.00) instead of euthanasia (\$150.00) or immediate rabies vaccination and place in six month quarantine (\$3625.00)
- If the rabies vaccination status is *overdue with NO documentation of prior rabies vaccination*, under the 2016 the Compendium Control measures the following steps are options available for owners:
 - ◆ Euthanasia (\$150.00)
 - ◆ The pet receives immediate veterinary care with rabies vaccination within 96 hours of exposure and place in four months quarantine (\$2425.00)
 - ◆ The \$554 more expensive option includes immediate veterinary care and Prospective serologic monitoring (\$420.00). The pet is held in strict quarantine conditions until lab evidence is concluded.
 - If evidence of prior vaccination then keep under owner observation for 45 days
 - If NO evidence of prior vaccination then manage as unvaccinated pet.
- Ms. Joyce Beard asked why the change to 4 months from six months and Mr. Cecil expressed that most animals with rabies die within 10 days, so the Board of Health rule would save the pet owners money and be beneficial to Hoke County citizens.

Motion made by Mr. McGougan and seconded by Commissioner Wright to close the public the hearing. **Motion carried unanimously.**

Motion made by Commissioner Wright and seconded by Mr. Joe Alston to the Board of Health Rule for Post-exposure Management of Dogs and Cats specified by the National Association of State Public Health Veterinarians in the 2016 Compendium Control Measures pursuant to N.C.G.S. §130A-197. **Motion carried unanimously.**

IV. Approval of Minutes

Motion made by Commissioner Wright and seconded by Mr. Keith Walters to approve the minutes from the September 12, 2016 regular Board of Health meeting. **Motion carried unanimously.**

V. Old Business

BOCC Meeting: 10/3/2016

Helene Edwards, Health Director

- On 10/3/2016, the Hoke County Commissioners approved the following agenda items:
 - Bad Debt Write –Off amount of \$14,375.55 for the Hoke County Health Department for FY 2014-2015.
 - Contract for School Nursing Services between the Hoke County Health Department and Hoke County Schools.
 - The re-appointment of Mr. Keith Walters to serve on the Board of Health for a second term.

BOCC Meeting: 10/10/2016

- On 10/10/2016, the Hoke County Commissioners held an emergency meeting to discuss Hurricane Matthew disaster relief efforts.
- The shelter opened on October 8th at 6:00 AM at West Hoke Middle School and the Hoke County Health Department was responsible for the special needs component.

VI. New Business

Role of the HCHD Staff at Shelters

Helene Edwards, Health Director

- The Hoke County Department of Social Services is responsible for opening shelters and the coordination of the shelter operations.
- The Hoke County Health Department is responsible for the Special Needs component of the shelter. The Special Needs section is supervised by a registered nurse and is for people who require space for medical equipment that requires electrical power or appropriate air flow.
- As a partnership, the 12-hour shift consists of two employees: a registered nurse and an assistant (employee from any discipline).
- The Hoke County Health Department employees train for the shelter operations and these emergency work relief efforts are included in public health job descriptions.
- During Hurricane Matthew shelter operations, some Health Department employees had to use personal time for their time worked in the shelter which had never had been done in previous years. The employees were told not to use the Time Clock to reflect the time worked at the shelter and to use only the sign in sheet at the shelter for the recording of work hours. This practice did not accurately reflect the actual employment hours of Hurricane Matthew Disaster relief provided by the Health Department with the Special Needs Shelter and the employees who had to use personal leave time to work the shelter feel devalued and misled since the pay was regular wages.
- There needs to be a discussion about how to process work hours at the county shelter operations in the future, because there will always be the chance that a shelter may

have to open for an ice storm, hazardous spills, emergency evacuation, etc. There must be consist policies that comply with the labor laws.

Daymark

Helene Edwards, Health Director

- On September 28, 2016, the Hoke County Health Department and Daymark Recovery Services introduced mental health and substance use services to patients within the health department.
- Ms. Avis Johnson, MA, LPC, from Daymark, uses the Telepsychiatry office to provide services to patients referred on Wednesdays.
- Ms. Johnson provides clinical screening of potential Mental Health and Substance Abuse patients using a combination of screening tools (i.e., PHQ-9, GAD-7, Audit, DAST-10).
- She conducts clinical psychosocial assessments on all clients referred and treatment services to consumers with substance use and mental health problems between 9 AM to 4 PM.
- All services provided by Ms. Johnson are free of charge and the appropriate referrals are made to other treatment providers.
- Ms. Johnson provides the same service at the Richmond County Health Department on Mondays.

Accreditation Update

Helene Edwards, Health Director

- Hoke County HD is preparing for re-accreditation.
- All Re-accreditation materials are due for review December 1, 2016.
- We are in need of Agency Accreditation Coordinator; Ms. Murchison resigned at the beginning of October 2016.
- Ms. Ulva Little-Bennett and the Management Team are making sure all the evidence is identified for the activities.
- Ms. Gay Welsh, our former Nursing Consultant, is interested in assisting us under a contractual basis one day a week, starting in November 2016 and she will be present during the accreditation site visit February 14-15, 2017.
- At the present time, Ms. Welsh's contract is being negotiated; however her rate would be \$35.00 an hour to include travel expenses (10-20 hours a week).

Motion made by Mr. Walters and seconded by Mr. Alston to approve negotiation of a contract with Ms. Gay Welsh to assist the Hoke County Health Department employees with the 2017 Accreditation process. **Motion carried unanimously.**

Clinical Annual Report Update

Cindy Morton, Nursing Director

Child Health & Immunizations—Cheryl Williams, BSN, RN

- The hours of operation are 8 AM to 5 PM Monday through Friday and 8 AM to 7 PM on the 1st and 3rd Mondays of each month.

- Preventive and primary care services are provided in the Child Health Program.
- The Child Health statistics for FY 2015-2016 are as follows:
 - ◆ Child Health Primary care (Problem visits) 328
 - ◆ Child Health Preventive care (Well child) 498

FY 2015-2016, limited providers available in clinic daily.
- As of July 2016, North Carolina required all school-age children to have a physical assessment completed within the first 30 days of enrollment in the public school system.
- Ms. Jones, FNP, has pediatric experience and she enjoys working with the children and providing the comprehensive physical examination.
- Ms. Williams, as an Enhanced Role RN for Child Health, has developed a rapport with children and their parents of the Child Health clinic. This relationship has helped Ms. Williams to recruit many underinsured and uninsured children for Child Health services at the Hoke County Health Department.
- The Hoke County Health Department provides immunizations to children and adults with Medicaid, health insurance, Medicare, and the uninsured.
- Vaccines for Children (VFC) are provided to individuals who meet the criteria.
- The 2017 Immunization goal for Hoke County is 59%.
- In FY 2015-2016, the Hoke County Health Department provided 2531 immunizations to 1064 clients.

CC4C (Care Coordination for Children)—Beth Porreco, BSN, RN

- CC4C is an at-risk population management program that serves children from birth to 5 years of age who meet certain risk criteria. The main goals of the program are to improve health outcomes and reduce costs for enrolled children.
- CC4C serves primarily Medicaid children; however funds are provided from the State to serve non-Medicaid children referred to the program.
- Ms. Porreco discussed that Ms. Johnson has provided mental health services to the some Hispanic mothers who were referred by CC4C Case Managers and there is a need for a support group for a few Hispanic mothers.
- The collaboration between the Health Department and Daymark is very beneficial for our Hispanic patients because we have interpreters onsite and at the same location as other appointments, so no additional travel. Many Hispanic patients have been referred to mental health services; however the patients rarely made it to the initial appointment.
- Ms. Porreco discussed the Pregnancy Case Management (PCM) Program and the importance of reducing the toxic stress indicators in pregnancy.
- The case management consists of the following mechanisms: face-to-face appointments, telephone calls, and making home visits.

- During the FY 2015-2016, 530 clients received services through CC4C and PCM (292 PCM clients and 238 CC4C clients).
- As October 1, 2016, 138 pregnant women are enrolled in PCM and 128 children are enrolled in CC4C.
- The employees for CC4C and PCM consist of three social workers (BSWs) and one registered nurse.

Administrative Update

Jenny McDuffie, Administrative Officer

- The following table summarizes the finances for September 2016:

	September 2016
Revenues	297,382.70
Expenditures	217,459.32
 	
State Funds Used	59,588.50
Local Appropriations	90,423.29
Medicaid	32,111.83
Fees	35,335.70
Total (<i>Expenditures</i>)	217,459.32

- The Medicaid Cost Settlement was received for FY 2015 in September 2016. The amount using the new statistical formula is **\$242,248.50**. Ms. McDuffie explained that we have not received the percentage breakdown per program for Medicaid Cost Settlement funds. Also, there needs to be clarity that if funds taken back to previous years and reflected in current budget year, then it must be reflected on the Health Department escrow account.
- Ms. Kathy Brooks, DPH Administrative Consultant, for Hoke County Health Department will be conducting a coding and billing audit on October 26, 2016. (This audit is rescheduled from September, when the State had the travel restrictions with the gas shortages.)
- Ms. Shaquita Jones, FNP, has had all of her credentialing applications completed for billing insurances and other healthcare source providers used at the Health Department; however Medicaid (NC Tracks) can take up to 3 months to complete and the process is even longer now with all the NPI provider changes.

Clinical Update

Cynthia Morton, Nursing Supervisor

- Ms. Morton presented the Clinical Services Spreadsheet to the Board of Health that shows service count data ending in September 2016.
- Ms. Morton announced that Hoke County had one Eastern Equine Encephalitis Virus death in September. There was a public service announcement from the State Public Health Branch in September for all the counties with EEE virus deaths.
- After further review on Meningitis B vaccines and follow-up with the Immunization Branch, the decision was made to continue to provide the Meningitis B vaccines high-risk patients who qualify for Vaccine for Children.

- The Annual Breast Cancer Walk was held on October 7, 2016 at 12:00 PM and the weather was not the best as we prepared for Hurricane Matthew. This year there were 20 participants and three survivors who participated in the walk and luncheon.
- The maternity clinic gained 12 new pregnant women during the month of September 2016.
- Ms. Joy Stafford, RD, LDN counseled six patients for medical nutrition therapy.

Health Director's Update

Helene Edwards, Health Director

- Hurricane Matthew has brought an increase of mosquitos into the Eastern part of the Hoke County.
- Hoke County is applying for FEMA Mosquito Abatement funding to seek reimbursement for mosquito spraying provided in those areas.
- Michael Doyle State Entomologist set out traps tonight and will be back tomorrow to collect mosquito for report.
- Since Hoke County did have an EEE virus death in September 2016, there is great concern about the increase adult mosquito that can carry such deadly viruses as EEE virus and West Nile virus.
- FEMA reimburses 75/25 county for mosquito spraying if all the appropriate data is accepted.

Motion made by Mr. Alston and seconded by Mr. Walters to approve request for mosquito spraying in the affected areas by Hurricane Matthew. **Motion carried unanimously.**

- The Hoke County Health Department Management Team and IT Department is working on a Social Media policy for departmental and personal private usage.

BOH Term Expiration (1)

Vance McGougan, Chair

- Ms. Beard is unable to serve a second term on the Board of Health. The Board is currently looking for a registered nurse who resides in Hoke County who is interested in serving on the Board of Health.
- Mr. McGougan will contact Ms. Karen Brois, RN and Ms. Gayle Lowry, RN to explain the Board of Health position duties and responsibilities and determine interest.

VII. Closed Session

Motion made by Mr. Alston and seconded by Suzanne Balfour to go into closed session for *personal matters* G.S. § 143-318.11 (a) (6). **Motion carried unanimously.**

Motion made by Mr. Walters and seconded by Mr. Alston to come out of closed session. **Motion carried unanimously.**

VIII. Other Business

IX. Next Meeting Date

Next regular meeting will be Monday, November 14, 2016 at 7:00 PM.

X. Adjournment

- ❖ The meeting ended at 8:35 PM.

Motion made by Mr. Alston and seconded by Commissioner Wright to adjourn the Board of Health meeting. **Motion carried unanimously.**

Respectfully submitted by:



Helene Edwards
Board of Health Secretary



Approval Date

Table 1. 2016 Rabies Compendium Changes for Postexposure Management of Dogs and Cats by Vaccination Status: A Comparison to § 130A-197 and Projected Fiscal Impact to Pet Owners

Rabies Vaccination Status of Dog or Cat	Current G.S. 130A-197 Control measures	2016 Compendium Control measures	2016 Compendium Financial Impact
1. <u>Currently Vaccinated</u>	Provide booster dose of rabies vaccine within five days of exposure (\$25.00)	Immediate veterinary care with rabies booster dose within 96 hours of exposure (\$25.00+). Owner observation 45 days.	Equal to existing standard
2. <u>Unvaccinated</u> (Has never been vaccinated against rabies)	A.) Euthanasia (\$150.00) or B.) Immediate vaccination against rabies and place in six month quarantine (\$25.00 + \$3600.00)	A.) Euthanasia (\$150.00) or B.) Immediate veterinary care with rabies vaccination within 96 hours of exposure and place in four month quarantine (\$25.00+ \$2400.00)	A.) Equal to existing standard B.) \$1200.00 less expensive
3. <u>Overdue with Appropriate Documentation</u> of prior rabies vaccination (at least one prior valid rabies vaccination certificate)	A.) Euthanasia (\$150.00), or B.) Immediate rabies vaccination and place in six month quarantine (\$25.00 + \$3600.00)	A.) NA B.) Immediate veterinary care with rabies booster dose within 96 hours of exposure, keep under owner observation for 45 days (\$25.00+)	A.) ~ \$125.00 less expensive than existing standard (does not include emotional cost of pet loss). B.) \$3600.00 less expensive
4. <u>Overdue with NO Documentation</u> of prior rabies vaccination	A.) Euthanasia (\$150.00), or B.) Immediate vaccination against rabies and place in six month quarantine (\$25.00 + \$3600.00)	A.) Euthanasia (\$150.00), or B.) Immediate veterinary care with rabies vaccination within 96 hours of exposure and place in four month quarantine (\$25.00+ \$2400.00), or C.) Immediate veterinary care and Prospective serologic monitoring (\$420.00) 1) IF evidence of prior vaccination then keep under owner observation for 45 days 2) IF NO evidence of prior vaccination then manage as unvaccinated (category 2. euthanize or 4 month quarantine)	A.) Equal to existing standard B.) \$1200.00 less expensive C.) \$554.00 more expensive includes additional cost for strict quarantine until lab evidence finalized. Note this may obviate the need for either A or B above and, while a new expense, is considerably less expensive than either A or B above

Note: All costs are approximate. Table is not meant to be all inclusive of all recommendations and costs but addresses the common situations with the most fiscal impact.

*Consult Communicable Disease Branch (919-733-3419) for specific guidance. Recommendations may be subject to change.

2016 Clinic Services Spread Sheet

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
LTBI	0	0	0	0	0	0	0	0	0			
Tb Suspect / Tb Case	0 / 2	0 / 2	0 / 1	1 / 1	1 / 2	0 / 2	0 / 1	1 / 2	1 / 2			
Chlamydia	16	37	22	17	18	22	22	18	25			
Gonorrhea	6	6	15	7	12	12	6	11	7			
NGU	0	2	0	0	1	0	0	0	0			
Syphilis			1	2	0	1	2	0	0			
Salmonella	1	0	0	0	2	0	0	3	1			
Eastern equine encephalitis virus (EEEV) - Death	0	0	0	0	0	0	0	0	1 adult			
Influenza Death	0	0	1 adult	0	0	0	0	0	0			
HIV Tests	77	89	101	90	79	82	80	108	91			
Pregnancy Tests / # Positive	50 / 17	37 / 11	66 / 20	54 / 19	48 / 5	72 / 18	59 / 17	73 / 25	49 / 12			
NOB Patients	13	16	21	19	7	10	6	17	12			
Ultrasounds	11	17	11	18	6	30	12	21	20			
Maternity Patients / Deliveries / Transferred	2	69 4 --	82 4 ---	67 6 ---	69 8 ---	74 8 ---	77 6 ---	73 8 ---	74 11 ---			
PP / Newborn Assessment Home visiting	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0			
Child Health Scheduled /	77	117	100	87	107	84	77	148	159			

2016 Clinic Services Spread Sheet

	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
LTBI	0	0	0	0	0	0	0	0	0			
Tb Suspect / Tb Case	0 / 2	0 / 2	0 / 1	1 / 1	1 / 2	0 / 2	0 / 1	1 / 2	1 / 2			
Chlamydia	16	37	22	17	18	22	22	18	25			
Gonorrhea	6	6	15	7	12	12	6	11	7			
NGU	0	2	0	0	1	0	0	0	0			
Syphilis			1	2	0	1	2	0	0			
Salmonella	1	0	0	0	2	0	0	3	1			
Eastern equine encephalitis virus (EEEV) - Death	0	0	0	0	0	0	0	0	1 adult			
Influenza Death	0	0	1 adult	0	0	0	0	0	0			
HIV Tests	77	89	101	90	79	82	80	108	91			
Pregnancy Tests / # Positive	50 / 17	37 / 11	66 / 20	54 / 19	48 / 5	72 / 18	59 / 17	73 / 25	49 / 12			
NOB Patients	13	16	21	19	7	10	6	17	12			
Ultrasounds	11	17	11	18	6	30	12	21	20			
Maternity Patients / Deliveries / Transferred	2	69 4 --	82 4 ---	67 6 ---	69 8 ---	74 8 ---	77 6 ---	73 8 ---	74 11 ---			
PP / Newborn Assessment Home visiting	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0	0 / 0			
Child Health Scheduled /	77	117	100	87	107	84	77	148	159			