Meeting Called To Order – Dennis Joyner
Public Health contemporaries from every nook and cranny of the Old North State huddled into Cardinal Room, meeting one another with both uncertainty and hopefulness of the coming days. President Joyner, reflecting that though we meet the darkness and strife, the sunny side we also may view. Keeping on the sunny side, as he is known to do, President Joyner convened the meeting at 0934.

Approval of Minutes – Stacie Saunders
Motion to approve minutes of the June 21, 2018 meeting was made and seconded; motion passed.

Treasurer’s/Financial Report – Stacie Saunders
Motion to approve the Treasurer’s/Financial Report was made and seconded; motion passed.

Approval of the FYE 19 Budget – Stacie Saunders
President Joyner stated that the budget was essentially the same as FYE 18 with an increase in the accounting fees. President Joyner stated a formal audit process will occur in FYE19 and this increase in the budget is indicative of the associated costs of such process. Nigel Bearman with Bearman CPA Group, out of Wilmington, will conduct and prepare the audit.

Motion to approve the FY 19 budget was made and seconded. Motion passed.

President’s Report – Dennis Joyner
President Joyner asked if any retiring health directors were present. Joey Huff reported that he is officially retiring from Lenoir County. Huff reported that Pamela Brown will serve as health director in Lenoir County beginning July 23.

President Joyner inquired if there were any new health directors in our midst. At this time, Stephanie Cannon informed the membership that she was appointed health director in Carteret County.

President Joyner then implored if there were any other announcements of positions amongst the membership. At that time, Marlon Hunter professed that he has resigned from Forsyth County to return to his hometown of Spartanburg, SC to serve as the CEO of a FQHC in that area. Hunter stated he last day is August 17.

President Joyner updated the membership that 73 local health departments have signed onto the NCALHD non-binding LOI process. He also reported that five non-binding LOIs have been signed via this process. These include United, WellCare, Carolina Complete Health, Aetna and, most recently, AmeriHealth Caritas. President Joyner reported that a few LOIs remain under review including those with Blue Cross Blue Shield and Meridian.

President Joyner received a request from the Medicaid’s Medical Care Advisory Committee for a representative to serve on the Provider Engagement Sub-Committee. This sub-committee provides guidance regarding provider education in terms of transition to managed care for Medicaid. President Joyner appointed Scott Harrelson (Craven County) to serve on behalf of NCALHD.

President Joyner stated the NC Association of County Commissioners Conference (NCACC) is scheduled for August 23-25. NCACC asked NCALHD to present at the conference on Environmental Health. President Joyner stated that typically this is a panel discussion regarding hot topics in Public Health. Potential topics for inclusion in the panel are as follows:
- Role of Public Health in Responding to Environmental Health Pollution (e.g. GenX)
- Regulatory Functions of Public Health in Environmental Health
- Advocacy for Core Public Health Funding at the State Level
- Follow-up to the Local Response to Opioid Crisis

President Joyner stated the Smoking Cessation Leadership Center is hosting a Breathe Easy Leadership Academy on September 6 in Raleigh, NC. The planning committee asked that NCALHD membership consider attending the event on September 6.

NC DHHS Chief Medical Officer/State Health Director Report- Dr. Betsey Tilson
Tilson stated that DHHS released a press statement regarding Gen X and the testing of 30 individuals in Cumberland. This testing is in conjunction with CDC to determine if Gen X is detectable in blood and urine.
Tilson then updated members on the NC Opioid Action Plan. She stated that one component of the state action plan is to create a Payer’s Council. The purpose of this council is to align best practices and policies from the payer’s side to support safe opioid prescribing, naloxone distribution, decrease barriers for treatment, and deliver provider education. This council has been meeting for roughly seven (7) months and produced a draft report. Payers will review the draft report and then the report will be shared with other stakeholders, including NCALHD, when finalized.

Tilson stated that work continues on the Early Childhood Action Plan. The draft will be ready for initial stakeholder review very soon. NCALHD is a key stakeholder and, as such, will be included in that initial stakeholder review per Tilson.

Tilson stated the Determinants of Health screening tool has been revised. Cumberland and Dare counties will begin field-testing the revised tool. The tool will be translated into Spanish for field-testing.

Tilson provided an update on the Resource Platform process. She stated the Foundation for Health Leadership and Innovation (FHLI) is seeking additional information on some of the proposal submitted. Tilson stated the decision regarding the vendor is expected by first week of August.

Tilson then provided an update on the Medicaid transition to managed care. NC DHHS remains in daily negotiations with CMS regarding the regional pilots. Tilson stated that as part of those pilots, public money will be matched with philanthropy money. Tilson asked if there are philanthropic groups locally that might be interested in these regional pilot to please notify her as NC DHHS would like to have a coordinated approach regarding philanthropic agencies.

Bill Smith (Robeson County) asked if any children were included in the 30 individuals that will be tested in the mentioned Gen X testing. Danny Staley (NC DPH) stated that one adolescent was included in the sample population. He added the CDC did not ask specifically for infants. Tilson further added that the sample population also has to do with the ability to compare testing data with national data included in the NHANES, which does not include younger than 12 years. Smith added that industry involved may feel that the proper population is not being used or reflected in the testing population. Tilson reiterated the purpose of the testing: 1) Can we detect the chemical and 2) Can we compare it to national data? Philip Tarte (New Hanover County) asked how this study then differs from other studies that are taking place regarding this issue. Tilson stated that she has heard concerns that why not testing in other counties and further described additional studies that are occurring via other institutions with other counties.

Fred Thompson (Anson County) asked if CMS approved the 1115 Waiver. Tilson stated no and further explained that CMS was willing to approve some of the waiver but not all. NC DHHS strategy has been to have the waiver approve all at once as not to delay major and important components later on if approved in segments. Thompson asked if June 2019 was still the expected date of rollout start. Tilson stated to expect implementation rollout in the fall of 2019.

**NCDPH Division Director Report- Danny Staley**

Staley shared an ASTHO visual illustrating the work of public health. See attached.

Staley provided information on the HIV Medication Assistance Program (HMAP). He stated that a few years ago, there were roughly 5,000-6,000 participants in the program and currently there are more than 8,200 participants. Staley expressed that this program is where treatment become prevention. Staley urged local health departments to think about how they will talk about HIV particularly in light of the opioid epidemic. He further reflected on how the perception and reality of HIV has changed in the last two decades.

Staley urged members to visit the Communicable Disease dashboard. Members can access the dashboard at [https://public.tableau.com/profile/nc.cdb#!/vizhome/NorthCarolinaDiseaseStatistics/DiseaseMapsandTrends](https://public.tableau.com/profile/nc.cdb#!/vizhome/NorthCarolinaDiseaseStatistics/DiseaseMapsandTrends)

Staley discussed the CDC Opioid funding. Staley stated that this funding is coming to states via the Public Health Emergency Response vehicle. NC DPH is working with a new tool for this funding and have had four weeks to get plan and budget for $3.2M coming to NC. Staley stated that the hope is to fund some of the project requests that did not receive funding in the Opioid Action Plan competitive grant process.

Staley had a meeting this morning regarding the Public Health Block Grant and how best utilize that fund to serve the state and local communities.

Staley provided a brief summary of the Legislative Short Session including the extension of the Temporary Food Establishments (TFEs) and provision for Licensed Soil Scientists (LSS) to submit plans directly to local Environment Health section. DPH is working with Attorney General Office about the liability to the state and counties in regards to the LSS provision.
Staley reminded members that Public Health Leaders Conference will occur in January 2019. Staley stated that Surgeon General Jerome Adams is tentatively expected to attend. Healthy People 2030 will likely be the focus of the conference.

Tarte commented on the Environmental Health Committee update from the previous day, particularly about the challenges with recruiting and retaining Environmental Health staff, which in turn affects the turn-around times and backlogs for permits. Tarte stated that recent legislation was potentially the result of long wait times for site inspections and the desire to have another option when local health departments are experiencing immense backlogs. Tarte implored if there are ways to apply quality improvement principles to backlogs in order to present legislators with an action plan showing local public health’s own efforts to reduce the number of weeks required. Staley replied that some action has taken place including the recent changes made to CIT and exploring partnerships with universities that will allow individuals to graduate with “intern” status. Staley suggested utilizing the Environmental Health Committee to discuss this issue further. Steve Smith (Henderson County) commented on the economic boom that is complicating the matter, as the absolute number of properties requiring permitting increases and the confounding issue that the properties requiring permit may be harder to permit. Tarte stated NCALHD could not win a fight that allows additional options to the public, but NCALHD should advocate that the rules support public health and safety regardless of the option used to permit. Sue Lynn Ledford (Wake County) asked where the discussion was regarding the mandatory acceptance of the LSS options by the local health departments, including if there are any disclaimers or clauses that can be added to protect the local government. Staley stated that at this point the legislation places accepted liability on the local government. Staley stated that legislators understand the unintended consequence of this statute and have intimated that they will address in the upcoming long session. Chris Dobbins (Gaston County) asked if it is feasible for local health departments to share human resources to help reduce the backlog in neighboring counties. Staley stated that it is feasible in that NC DPH can expedite authorizations for work in other jurisdictions as long as local staff is willing to contract in other counties. John Morrow (Pitt County) reiterated Tarte’s point about reaching representatives about what NCALHD is doing to improve the process and reduce the backlog in health departments. Further discussion ensued regarding cross training within Environmental Health, which allows staff to be authorized in multiple areas thereby increasing flexibility within local health departments in times of economic flux. President Joyner suggested that the Environmental Health sub-committee place this item for discussion at the next meeting with particular focus on incorporating action into Legislative communication plan.

**NCDPH Chief Public Health Nurse - Susan Little**

Staley introduced Susan Little from the Chief Public Health Nurse Office on behalf of Phyllis Rocco.

Little stated that the deadline for the physical assessment of the Adult and STD Enhanced Role RN training. The deadline is now July 30. Little asked that members share this information with local staff. The cost of training $650 and begin August 23.

Little provided a list of counties that have completed and submitted their Aid To County Essential Functions report. Yellow highlighted counties indicate that the county has not yet submitted their report. Please see attached list.

**NCDPH Environmental Health Report- Larry Michael**

Not Present

**NC Office of Rural Health - Maggie Sauer**

Sauer stated that ORH has spent some time speaking with communities about the HRSA Rural Opioid Coalition Funding. Sauer mentioned several communities that have begun work on proposals including Burke, Robeson, Halifax and Mountain AHEC. This funding is specifically for local coalition building. Sauer stated that 75 awards are likely with $250,000 for each award. Sauer stated that the applications are due July 30.

Sauer mentioned that ORH is exploring a regional approach to their work, including having their team members assigned to regions across the state. The ORH implemented a regional pilot within their office for staff working with western NC communities. Last week, ORH staff officially rolled out that pilot allowing staff from different focus areas (e.g. Critical Access Hospitals, Community Health Grant recipients, etc.) to work as a regional team on initiatives. Stakeholders, including NCALHD, will receive a list of all team members working on that regional team. See attached map.

Sauer stated that the Primary Care Access Committee has a dashboard on all the community health grantees pertaining to UDS data. Lynette Tolson represents NCALHD on this committee. Currently, the committee is looking at the data grantee-by-grantee and group type (e.g. health departments, free clinics, etc.) but Sauer explained there is an opportunity to look at those measures from a population health perspective. Sauer stated she would attend a future meeting and share that data.

Sauer shared that the community health grants serve as an avenue for collaboration and she would like to share those examples of collaboration from the community health grants with NCALHD. Beth Lovette (NC DPH) asked if grantees could receive the data dashboard prior to presenting that data to NCALHD. Sauer stated grantees would see their dashboards prior to further presentation of data. Lovette added that the transparency of data sharing is critical particularly for sharing of best practices. Sauer further added the
purpose of the data is not to be punitive but rather illuminating in that it can present opportunities for collaboration and cross-discipline work in communities.

Lastly, Sauer mentioned the “Verify Before You Buy” website. Individuals can use this website to search online pharmacies and verify their legitimacy. The information can be accessed at [https://verifybeforeyoubuy.org/](https://verifybeforeyoubuy.org/).

**Executive Director’s Report – Lynette Tolson**
Not present

**Committee Reports:**

**Nomination and Bylaws – Jim Bruckner**  
Action:  
Information: Did not meet

**Education and Awards – Suzanne Wright**  
Action:  
Information: Did not meet

**Technology – Jim Madson**  
Action:  
Information:

Phyllis along with Julie Walker and John Williams discussed the LHD-HAS (quarterly service count report):

- Each County asked to compare their EMR service count with the LHD-HAS. Those numbers should be very close. If not, please work with Julie Walker to straighten out the issues. Most data errors seem to be on LU codes.
- For most counties, the reports seem to correlate well. Patagonia uploading data weekly now to improve the correlation for those counties using them. Other counties are uploading themselves.
- The LHD-HAS is what the State will be using to report state-wide numbers. This includes counts sent to funding sources (ie Federal) and therefore accuracy is vital. State cannot see if the county has done the comparisons. Check with your data manager to see if your health department is doing the comparison.

Curt Martin presented on the Aid-to-County (ATC) Report QI efforts:

- Conducted an official QI project on the reporting system. Multiple players involved.
- Found that the ATC has dual roles (payment and reporting) which sometimes causes conflicts. Initial thought was to separate the roles, but that would be too cumbersome and would lead to duplicate entry for users.
- Short term system changes (coming in September):
  1. Each HD will see only their funds
  2. Change the 101,102,103… labels to a descriptive heading
  3. Saving the data will now stay on the appropriate screen instead of returning to beginning
  4. Obsolete columns are going to be eliminated
  5. Printing will no longer require a screen shots
- Future system change will include pop-up directions when you mouse-over the characters
- Future QI evaluations will be looking at programmatic/software efforts

Some Directors reported trouble with ATC passwords not working. Phyllis unaware of issues, but will look into this and get back with the health directors.

Discussion of lost data ended up with the recommendation that when you cut off parts of an EMR module that the data be given back to the health department either prior to the cut-off or have plans to recoup the data before it gets lost. Same could be said about switching to new vendor.

Bob Martin talked about the start of testing the minor consent/confidentiality blocking process with HIE. Two counties will be piloting this effort (one CureMD the other Patagonia) over the next couple of months. More to come.

**Policy and Finance – Steve Smith**
Action: Smith presented the NCALHD proposed Opioid Position Statement that Cris Harrelson and the Opioid Task Force constructed. Smith stated the Policy and Finance Committee reviewed the statement and motioned to adopt the statement. Motion from committee needs no second. President Joyner called for the vote and motion passed. The Opioid Position Statement was adopted by membership.

Information:
Cris Harrelson (Brunswick County) also referenced the next steps for the Opioid Task Force which included consideration of work in Massachusetts which structured a framework for opioid initiatives based in the essential services of public health. This framework can be accessed at http://opioid-toolkit.mhoa.com/. DPH referenced some of the near term funding for opioid related activities will be funneled through Preparedness. In this transition funding period, public health will benefit by having an additional (10-15) grant proposals for the Opioid Action Implementation Plan funded. See attached funding breakdown document.

Chris Dobbs, NACCHO Board member, updated the Association about the organization’s recent work including strategic planning, revamping of the organization’s focus and a new leader. He shared that NACCHO’s work in Washington, D.C. was invaluable for public health and that his involvement with the organization had been very rewarding. Lisa Harrison, NACCHO Board member, shared information about the recent NACCHO conference with the theme of “Unleashing the Power of Local Public Health”. More information on the theme can be found at https://nacchovoice.naccho.org/2018/07/18/naccho-annual-2018-unleashing-the-power-of-local-public-health/. She commented on the President’s challenge to create and support more resilient communities nationwide. Harrison also mentioned that there were over 1,500 attendees for the conference. Stacie Saunders shared information from one particular presentation at the NACCHO conference, which involved Kentucky and an innovative strategic initiative to strengthen consensus on the vision and importance of public health which ultimately led to additional investment. Health directors were encouraged to attend the 2019 NACCHO conference being held in Orlando, Florida.

Dennis Joyner referenced the upcoming NC Association of County Commissioners’ Conference upcoming in August and the invitation for health directors to present information on key topics. Dennis shared the history of our presentations and that likely topic categories for 2018 include environmental health (Gen X and impacts related to recent legislation), public health funding realities and an update on our progress to date with the opioid epidemic. Health directors and potential speakers were encouraged to connect with Joyner if they had interest in presenting or attending the conference. See attached overview.

Lastly, Smith urged members to be mindful of the topics and issues that need addressing from now until October as there will be no committee meetings in September due to NCPHA Fall Conference.

Planning and Innovation – Janet Clayton
Action: None
Information: Did not meet

Preparedness/EPI – Lillian Koontz
Action: None
Information:
Dr. Moore provided an update from the section and introduced many section staff members to the group.

- Epi Team training will be available January/February 2019 --- thank you to all that provided input. The training will be ½ day.
- Summer camps are experiencing Norovirus cases.
- Measles Outbreak almost over as 2 incubation cycles are complete.
- Grateful for the close partnership with the Immunization Staff this year.
- Wayne Mixon with PHP&R will be working with local PCs to determine best mode of communication. The PanFlu quarterly focus went well; next will be contamination incidents.
- The longhorn tick has been identified in NC. The state is working on a tick ID program and exclusively accepting specimens from veterinarians’ offices.
- Justin Alberston and Susan Sullivan are finalizing Hep-A training for health department staff. Be looking for 8/23/18 webinar information.
- Continue efforts to target high-risk populations for vaccination against Hep-A (MSM, Homeless, drug users). The state has adequate supplies and is eager to distribute locally for use.

Maternal & Child Health, Care Management and WIC – Teresa Ellen
Action:
Information:
**Positive Parenting Program** – Marshall Tyson reported the Triple P (Positive Parenting Program) started in 2011 with three sites. They are now expanding to 7 funded sites. The Department of Social Services received 4 million dollars from the legislature to address prevention and they have allocated 1 million to the Department of Public Health for expansion of the Triple P program. There is one site per region and those sites include: Madison, App District, Durham, Halifax, Albemarle, Pitt, Cumberland, and Mecklenburg. If you are interested in having any of your staff trained in Triple P contact the lead county for your region. There will be a formal joint letter from DSS and DPH going out in the next couple of weeks.

**Healthy Communities Update** - Sharon Nelson reported her section is working on a new strategic plan for the 19-20 federal fiscal year. They are taking the time to collect valuable input from Local Health Directors. A committee of 13 Health Directors met on July 19 at 8 am to provide input on how health communities can increase the impact of the program. Ms. Nelson stated she will report back to the group once all the information has been collected and synthesized.

**Virtual Health** – Belinda Pettiford reported that Virtual Health which is the new documentation system for care management will roll out on October 29th. The CCNC staff and DPH OBCM consultants will be trained as trainers. In addition, they have reached out to the 20 largest Counties and asked them to send staff to a 2-day training to become champions for implementation. This training will be most likely be held in the Raleigh or Charlotte area.

**Environmental Health – Heath Cain**

**Action:** None

**Information:**

Cain stated that the committee topics were covered in Staley’s update. Please see above.

**Public Health Prevention & Promotion – Josh Swift**

**Action:**

**Information:**

Swift stated that Sally Herndon provided information regarding new tobacco prevention funding. The information included the following:

- **$194,944** to do Mass-reach health communications to reach young people through social media about the dangers of tobacco use, with a focus on new and emerging tobacco products. More to come; we will work with you to try to focus on local activities that increase the impact of this media campaign.
- **$50,306** – Tobacco Free Schools Compliance Project. Purchase new metal signs needed for Tobacco Free Schools. We will ship them to 10 Regional Tobacco Control Managers; call yours if you want to get involved. LHDs and SHACs can help by:
  - Distributing the signs to schools throughout the region.
  - Develop local news releases and host news-worthy events as the new signs go up.
  - Help celebrate the 10th anniversary of Tobacco Free Schools in NC!
- **$3750 for 3 Pilots Regional from 3 Local/Regional School Districts** to analyze nicotine content in e-cigarettes confiscated in 1-3 NC school districts. In Collaboration with NC Public Health Lab. This is a replication of an Arizona Project designed to show the higher level of nicotine in confiscated e-cigarettes compared to student perceptions. Will be used to educate students and school leaders/personnel. Appalachian District Health Department and school nurses in Watauga Co prompted this action; The Regional Tobacco Control Managers will recruit the pilots in Central and Eastern NC!

Note: Preparing Agreement Addenda for the Tobacco Prevention funding (currently non-recurring) for 2019-20, in case it is refunded for FY 19-20.

**New Funding for Tobacco cessation ($250,000 R) in 2018-19**

- Current cessation funding: FY18-19 State budget appropriates $1.85 million (Recurring) for: coordinated and collaborative Smoking Cessation Program efforts, including:
  - **$1,573,820** (recurring) for QuitlineNC; and
  - **$276,180** (Recurring) for You Quit Two Quit.

Swift stated Dr. Kansangra presented an update on REACH grants.

Additionally, Nidhi Sachdeva presented the NC Opioid Action Plan: Public Education Campaigns. See attached presentation.

Lastly, Swift stated that representatives from the American Cancer Society attended to discuss early detection. Nikita Spears (NC DPH) and Carrie Burnette (American Cancer Society) informed the committee of the NC Advisory Committee on Cancer.
Coordination Control. This is a 34-member committee appointed by the General Assembly. Each year, the committee creates a state cancer plan. A survey is expected regarding colorectal cancer screening.

**Primary Care Committee – Carolyn Moser**
Moser stated the committee met on June 21 to discuss Carolina Access I and II. Moser stated there are some counties that are not a part of either. Carolina Access will transition into the Advance Medical Home tiered system in Medicaid Transformation. Moser stated that if a local health department does not provide primary care, that health department would continue to receive Fee For Service for services provided. The committee drafted a FAQ document and will send out the membership in the near future. Committee is looking at a gap analysis tool that health departments can use. Moser expressed gratitude to Beth Lovette and Dennis Williams for their support of the committee work.

**Public Health Regions**- No action or information items

**Partner Reports**

NCAPHA Report – No report

NCPHA Report – No report

NACCHO – See above comments from Chris Dobbins and Lisa Harrison

NCSOPHE- Not present

**Liaison Reports**

**ANCBH/NALBOH – Submitted by Barbara Ann Hughes**
Bob Blackburn has retired as Treasurer for ANCBH. Edna Hinsey will now serve as the Treasurer. Hughes stated that this provides an opportunity for another individual to serve as back-up Treasurer.

Hughes stated that 45 individuals from NC are attending the NALBOH Annual Conference. This represents 13 NC Counties. The Resilience Documentary will be shown at the conference.

Hughes stated that the NALBOH Election Ballot should be arriving in the mail. Dr. Bill Tillett from Person County will be on the ballot as an at-large member.

Hughes stated that there is a need for a new Accreditation Board member as Bob Blackburn is stepping away from service on that board.

Blackburn urges NCALHD membership to consider paying ANCBH dues, even if they are representing a consolidated agency.

**NCIPH/SPH Update- Rachel Wilfert**
Wilfert provided information on upcoming trainings offered by the NC IPH.

Annual School Nurse Conference Registration will occur soon.

Wilfert congratulated Chatham County Health Department on their recent acceptance into the Kresge Foundation Emerging Leaders Program.

**UNC-School of Government**
Not present

**Other Announcements:** Maggie Dollar (Lincoln County) invited all NCALHD members to the grand opening of their new building. Dollar stated the health department has been in the current building for 60 years. The new building expands the clinic area from five (5) rooms to 16 rooms and includes a demonstration kitchen. The open house is set for next Thursday from 1-6pm and ribbon cutting will occur at 4:30pm. Dollar will send an invitation via email to members.

**Meeting Adjourned**
Motion was made to adjourn, seconded, and passed unanimously. Meeting was adjourned at 11:31 am.

**Next Meeting** – August 16, 2018, @ 9:30 am, Division of Public Health, Cardinal Room, 5605 Six Forks Road, Raleigh, NC