

**North Carolina Association of Local Health Directors
Association Business Meeting
February 20, 2020
Cardinal Room. NC Division of Public Health, Six Forks Rd, Raleigh, NC**

Minutes

Meeting Called To Order – Janet Clayton

The threat of inclement weather kept some from attending the meeting in person today, a phone line was opened to allow access to those who were not present. The room quieted quickly to facilitate a rapid meeting. President Clayton called the meeting to order at 9:30am and asked if there were any retiring, new or interim health directors present. Merle Greene (Guilford County) shared February 29 would be her last day of service and expressed happy memories for her time in public health and wishing us all well. Ken Stern (Wayne) and DeShay Oliver (Cleveland) introduced themselves as interim health directors.

Approval of Minutes – Lillian Koontz

Keeping with the mindset of speed, John Rouse (Harnett) made a motion to approve the January meeting minutes as submitted, Stacie Saunders (Alamance) seconded the motion. It was approved without dissent.

Treasurer's/Financial Report – Lillian Koontz

A copy of the financial report was included in the packet provided to all in attendance. Teresa Ellen (Wilson) made a motion to accept the financial report, Tommy Jarrell (Richmond) seconded. Motion was approved without dissent.

President's Report – Janet Clayton

President Clayton shared the Consolidated Agreement was emailed to membership and modifications were discussed during the January meeting. President Clayton opened the floor to discussion or a motion to approve. Bruce Robistow (Halifax County) made a motion to approve the Consolidated Agreement as presented, the motion was seconded by Dr. Marilyn Pearson (Johnston). Motion approved without dissent.

The Preventative Health and Health Services Block Grant information meeting took place this morning, NCALHD representatives include Janet Clayton (Person), Joshua Swift (Forsyth) and Steven Smith (Henderson). This grant is intended to prevent disease, illness and injury and the intent of funds includes building infrastructure. There will be a public hearing on the Six Forks Campus, Building 1, Pine Room on February 25, 4pm.

Jill Moore provided information that another block of rooms have been reserved for the upcoming legal conference- please check the website for details. Included in the conference this year will be a presentation regarding first amendment auditors/filming in a health department.

NC DHHS Assistant Secretary for Public Health: Mark Benton

Dr. Cardra Burns sends regrets from Mark Benton who was unable to attend due to a scheduling conflict. Dr. Burns shared a great appreciation from Benton regarding the local response to the Coronavirus. Recently thoughtful conversation occurred between staff at DPH, local health directors, and Secretary Cohen regarding WIC. All parties were appreciative of the thoughtful discussion.

Chief Medical Officer/State Health Director Report- Dr. Betsey Tilson

Healthy People 2030 publication is available and Dr. Tilson is extremely proud of the work done with this report and is excited about how this work will impact the community health needs assessments of the future. Dr. Tilson encouraged folks to use the report and share widely.

Also on a ten-year cycle, Census 2020 is coming up, it is very important for everyone to be counted, especially those who often feel disenfranchised. It is extremely important for resources and planning that each person is counted. There are presentations available for use, Dr. Burns shared a memo and information is being prepared by Mark Benton which will include information about the Census and strategies for us at the local level. This memo and information will be distributed to health directors soon.

Last Friday, February 14 was the public opening for RFP lead pilot entities for the pilots for Medicaid Transformation. Nine proposals were received, which is exciting and those who responded are listed on the procurement website and the group is representative across the state.

In regards to coronavirus, weekly calls continue. Dr. Zack Moore is working very hard on preparedness and response. Very appreciative of the hard work being done at the local level regarding traveler monitoring and planning for next steps. To date, no one in North Carolina has tested positive for the virus. The DPH team continues to work with providers and local health department staff with excellent participation. While there have been no positive cases as of yet, the planning efforts for next steps should that occur are thorough and ready if needed. Incident command includes partners from public health, social services, emergency management, and emergency services. The Governor has commissioned a task force (email received about including local health directors) to ensure North Carolina is prepared should that occur-this task force will work through different scenarios and develop strategies. Discussion with membership included questions to Dr. Tilson: Do you believe we are getting accurate information from China so we are as prepared as possible for what is occurring? Answer: Hard to answer definitively if we are receiving complete and accurate information, but as with most emerging infectious diseases the severity and mortality rate is higher in the beginning-this week there was a jump in case count. Therefore, we are preparing for this, regardless of accuracy of reports. Question: There are reports about a mixture of Tamiflu and two different HIV medications are working for patients with coronavirus-is this true? Answer: I have seen the reports but do not have enough information to speak on this authoritatively, there definitely are ongoing efforts for testing antivirals. Question: Coronavirus is taking over media coverage, with no cases in NC any suggestions on how to refocus media coverage on the flu outbreak? Answer: yes, this is true and it has to do with risk perception. Continue messaging of how the flu is ongoing and flu vaccines are important.

Director of Division of Health Benefits – Jay Ludlam

Not Present

Executive Director - Lynette Tolson

President Clayton introduced Ms. Tolson and reminded us that this will be her last meeting with us before she takes on a new role in early March. President Clayton thanked Ms. Tolson for her service not only to our Association but also our public health partners. Ms. Tolson shared her phone number will remain the same, and encouraged us to reach out to her if needed in the future. Taking on the role of Executive Director for NCPACE, she will not be too far away. Ms. Tolson shared she will miss seeing us all on a monthly basis and is appreciative of her 12.5 years with public health.

Committee Reports

Technology – Jen Greene

Action: None

Information: Slides from the meeting attached. The pilot project for minor opt-out continues. Districts are having trouble with the pilot, stand-alone health departments have been successful. Later today there will be a call for CureMD counties regarding the “confidential button” to clear up any mixed information about the capability of that function and the legality of it. Virginia Niehaus and Jill Moore will be on that call.

Planning and Innovation – Scott Harrelson

Action: None

Information: Region IX brought forth the option of a state-level FQHC for discussion. Local Health Departments providing Primary Care are often times left to their own for funding and support. New access point funding is necessary to find available resources for any new FQHC, at this time it does not seem that North Carolina has the need to fund this sort of project. There is a request for Beth Lovette to push this request up to the state level to determine our state-wide need. A question was asked that if North Carolina did apply for a state-wide FQHC, what happens to the operating FQHCs? Harrelson shared that competition would be there, there is already competition between FQHCs funding and location of each FQHC is determined by the need.

Jim Madson (Beaufort) introduced an option of consistent questions across all counties for the Community Health Assessment to create statewide data and a data platform to garner the information. Madson shared this conversation is ongoing at the state-level including development of a user group, Madson has offered to be on this group. There would be many levels to include a “score card” for the SOTCH and the CHIP. Madson will provide more information soon.

Policy and Finance – Stacie Saunders

Action: 2020 Legislative Priorities Four priorities, three are carry over from 2019: expansion of Medicaid, allocation of additional state funding for Communicable Disease, and restoring the Maternal Child Health Block grant funds. The fourth priority is new this year: emphasizing the importance of local and state governmental authorities to evaluate industries looking to enter communities for their past environmental impact on water quality. **Motion made by Davin Madden (Lincoln) to accept the Legislative Priorities as presented, seconded by Chris Dobbins (Gaston).** No further discussion after those two, motion carried.

Information: Shawn Parker from Smith Law presented to committee as a follow-up to the work that began in April 2019. Parker reminded members that after their initial presentation in April 2019, Smith Law created a memo regarding considerations and tips for local health departments when entering into discussions with PHPs. Parker also stated that two PHPs created very “health department” specific contracts and others incorporated addenda or edits that included language from the RFP. Parker reiterated that even in Medicaid Transformation suspension, health departments can engage in value based work including the Healthy Opportunities Pilots and involvement in Accountable Care Organizations. Parker referenced an ACO toolkit created by Smith Law (attached to minutes) for local health departments to review and use as guide. The guide may also be accessed at <https://www.ncmedsoc.org/physician-resources/accountable-care/aco-toolkits/>. Lisa Harrison (Granville-Vance) inquired as to how far ahead FQHCs are in the ACO work. Discussion ensued as to the steps FQHCs have made and their involvement in CINs.

Alec Parker and Bobby White from the NC Dental Society presented on the revisions to 21 NCAC 16 W .0101 and 16 W .0104 regarding dental access shortages and scope for dental hygienists working under standing orders of dentist. The primary objective to the revision is to increase access to care. White informed membership that the new rules only apply to dentists in governmental entities and does not apply to private provider unless the provider goes into a contract with a government entity. Contracts with private dentists must have certain components including delineating what procedures will be covered by the standing orders and establishing dental homes. Please see the full presentation for more information (see attached).

Preparedness/EPI – Jim Madson/Stephanie Cannon

Action: None

Information: -Zack Moore: Flu season peaked in December/January and now it’s creeping back up. We saw Influenza B early, but now we are seeing mostly H1N1. Healthcare system is at capacity with flu and potential coronavirus. There is a new Governor’s taskforce for coronavirus. Right now, we are focused on containment mode (traveler monitoring/investigation/contact tracing/etc.) trying to buy ourselves some time. There is hope this will prevent a pandemic but can’t expect this will happen. There may have some transmission that cannot be detected yet. We need to think beyond containment and more into mitigation - this will be the focus of the Governor’s taskforce. Mitigation involves healthcare and community. The state is drawing upon past flu pandemic planning to help for coronavirus. We are not in a pandemic now; no sustained human-to-human transmission. There are still a lot of unknowns concerning severity or transmissibility. There are efforts to encourage people from utilizing the healthcare system unless absolutely needed to increase demand for service and spreading of disease. We need to focus on non-pharmaceutical interventions (respiratory etiquette, hand washing, stay home when sick). The taskforce will be looking at preemptive school closures and mass gatherings for future planning purposes. Counties should look at internal personnel policies related to quarantine/isolation. The state is working on developing plans to assist counties with the intense media scrutiny. Dr. Schoen - the lab received kit from the CDC to test for coronavirus through FDA Emergency Use Authorization (EUA). The CDC discovered the kit was faulty and new kits will be released in the future - TBD. CDC has stood up a surge lab in Atlanta due to this issue and the turnaround time went from 2 days to 12 hours. It’s not ideal for them to perform testing for the entire country. The lab hopes to get in house by early next week and is ready to go when Lab receives kits

from CDC. Testing must be done by CDC or approved labs (incl. state health departments) or be registered through FDA EUA for testing purposes. PFAS - posted results of community survey for communities around Chemours facility. Report looks at how this issue impacted the community's lives adversely.

-Virginia Niehaus: 10A NCAC 41A. 10 lists the diseases and conditions that are reportable in NC and is the backbone of the surveillance of CDs in NC. On Feb 3, the State Health Director issued a temp order pursuant to GS 130A-141.1 requiring immediate reporting of novel coronavirus. This temp order is effective for 90 days to allow time for rule making. On Feb 5, the CPH adopted an emergency rule to add novel coronavirus to the CD reporting rule (10A NCAC 41A .0101). This change was effective on Feb 17 and will remain in effect for 60 days. The CPH also approved proceeding with temporary rule making. The temp rule is currently in a shortened public notice and comment period running from Feb 5 to Mar 5, 2020. A public hearing will be held on Feb 24 at 2pm in the Cardinal room. There will be a special meeting of the CPH on March 24 to consideration adoption of the temp rule. After the temp rule is in place, permanent rule making will begin.

The proposed permanent changes to the rule include 1) adding three new conditions (Acute Flaccid Myelitis, Babesiosis, and Varicella; 2) making IGRA blood tests for detection of latent TB reportable; 3) relisting Zika, which was accidentally removed from the rule; 4) making measles immediately reportable; and 5) making technical changes related to nomenclature and scientific progress in lab testing and reporting. Timeline is 3/2 - 5/1 for public comment and 4/13 at 10am in this room for the public hearing.

-Dr. Jen Horney: Trying since Florence to get funding for a study to understand the impact on performing essential public health services post-disaster. Recently awarded pilot grant (\$7-8k). Want to sent a short survey out to LHDs to ask what kind of normal duties were interrupted or impacted during Hurricane Florence response. Want to measure indirect health impacts after a disaster. Hope to share findings in a couple of months. NCALHD voted to support survey - send to LHDs.

Maternal & Child Health – Teresa Ellen

Action:

Information:

North Carolina Maternal Health Innovation Program – Belinda Pettiford

The Women's and Children's Health section has received a HRSA grant to augment and strengthen the state's perinatal system of care and improve maternal health outcomes. The grant award is for 2 million dollars over the next 5 years. They will be partnering with several agencies to implement the program. As a part of the program there will be an opportunity for local health departments to apply for funding. A handout was sent out on the health directors list serv on February 20th with additional details and a list of the programs planned through the grant.

WIC Update – Maryanne Burghardt

Maryanne gave a presentation on WIC participation and funding. She stated we are seeing improvement in our participation numbers. We are not at old participation levels, but we are trending in the right direction. She reported there continues to be a big gap between eligible and actual participants leaving opportunities for improvement. In addition, there continues to be a gap between those enrolled and participating in the program. She stated they are going to begin to allow some additions to the food formulary to include eggs of any type and expanding the forms of cheese allowed to include sticks and grated cheeses from the 8-16 oz. variety.

Maryanne then went on to discuss WIC funding. She stated NC is currently funded for 223,000 participants. As of November of 2019 NC, had 210,377 enrolled. They are hesitant to ask for any additional funding when we are struggling to show increased participation. There is fear NC would suffer a penalty that will permanently decrease our allocation going forward. She also reported that the Recovered funding pool that has provided special dollars to WIC programs will likely be declining. She reminded us the Federal WIC budget was cut by 75 million and our state budget in 9 million less

than last year. The PowerPoint presentation was sent out on the Health Directors list serv on February 20th and contains additional details to include a list of best practices and the State's plan for increasing participation (WIC Reimagined).

Environmental Health – Battle Betts

Action: None

Information -- The Environmental Health committee received an update and guidance regarding mobile food units gas line safety from Shane Smith. There have been questions related to the inspection process and how it relates to the food and lodging inspection. The Department of Agriculture is responsible for any inspections related to these gas lines. Inspections are currently voluntary and there are only five staff available to do these inspections on a statewide basis. These inspections cannot be linked in any way to the environmental health permitting process. County and municipal ordinances offer a complicated path for relief but still have several shortcomings. Scott Harrelson suggested that local health departments coordinate with their local fire marshal to assist in situations that may require guidance.

Larry Michael provided an update on the onsite wastewater rules. The review and approval process will ramp back up in early summer. Larry also shared that the state has received a one million dollar grant to assist in funding the testing of 4400 child care centers.

As it relates to Coronavirus, there has been some misinformation circulating related to Chinese restaurants and potential for risk or exposure. This has led to a marked drop in business for these restaurants.

Larry also reminded us that the RNC is coming to Charlotte this summer. Mecklenburg County is taking the lead on volunteer and coordination efforts.

Public Health Prevention & Promotion – Joshua Swift

Action: Letter of Support from Association for Sally Herndon to apply for a CDC Grant to fund ten regional tobacco prevention efforts. Motion from committee needs no second. With no discussion, vote to approve carried.

Information: Herndon also provided a Tobacco 21 update, sharing that this is federal law, not a state law. Social media campaign by South Carolina and Virginia regarding vaping, looking for options to fund here would take about 2.7 million dollars. Franklin Walker from the North Carolina Medical Society gave a presentation about diabetes free NC, BCBS has invested five million dollars across NC, which is a conduit to increase referrals to the diabetes prevention program. Currently 91 DPP ongoing across the state, some of which are online.

Nominations and Bylaw –Dennis Joyner

Action: None

Information: None

Education and Awards: Tommy Jarrell

Action: None

Information: None

Public Health Regions-

No action items

Partner Reports

NCAPHA Report- Davin Madden (Lincoln) reported the Board meeting will occur after this meeting. During the meeting a transition plan for the vacant ED will be discussed.

NCPHA Report – Teresa Ellen asked membership to Save-the-Date for May 19 for the spring conference, Hilton Garden Inn at Crabtree, the theme will be Health Equity. Also, she reminded when we do our organizational membership to

please submit the six names of staff for the included membership slots. Last weekend the strategic planning session occurred and it was very successful. Planning on a series of lunch and learn

NCSOPHE- No report

NACCHO – Chris Dobbins (Gaston) reported he and Lisa Macon Harrison (Granville-Vance) will be attending the Leadership Conference in DC next week and will be taking the newly approved legislative agenda with them.

ANCBH/NALBOH – no report

NCIPH/SPH Update- Workforce Development

- Applications are open for the 2020-21 [NC Public Health Leadership Institute](#). This year-long leadership institute is designed for mid and senior level leaders at state and local public health agencies. We encourage health directors to share with staff. Apply by March 31st.
- Training programs currently open for registration:
 - Regional **'Grantwriting 101' Workshops** for NCPHA members; Contact your local AHEC or NCPHA for dates and registration.
 - R for Epi and Public Health (May 1, 2020). – This hands-on workshop trains staff to use the open source R software for data analysis. This workshop is a great way to boost analytic capabilities at your agency.
 - *For those health departments with oral health programs:* the Oral Health Section in collaboration with NCIPH has just opened up a new online training course for dental hygienists in public health departments who wish to provide specific preventive care services to individuals without receiving a prior examination by a dentist and without a dentist being present. This course is FREE to qualified hygienists. Interested agencies should contact Jessica Scott at the Oral Health Section, Jessica.C.Scott@dhhs.nc.gov to get access to the course.
- Still accepting requests for Boards of Health training, contact rachel.wilfert@unc.edu.

❖ **Accreditation**

- We are now actively **recruiting a new cohort of Site Visitors**. Persons interested in serving in the Public Health Administrator, Public Health Nurse, Environmental Health Specialist, and Board of Health roles should review applicant information and, if qualified, apply at go.unc.edu/site-visit-team by February 21st. Contact nclhdaccreditation@unc.edu for questions.
- **Accreditation 101: New AAC Training** will be offered on April 23, 2020 from 9-4 in Chapel Hill. The New AAC training provides a basic overview of the accreditation process and the role of the AAC. The training is for new AACs, co-AACs and back-up AACs. The training is offered bi-annually, each spring and fall. Registration is now open.
- **The Accreditation Standards Workgroup** has been formed and will begin work on March 26 with an orientation video conference followed by monthly meetings throughout the spring and summer.
- Instead of our in-person Annual Accreditation Skills-Building Workshop this summer, we will host a **Skills-Building Webinar Series** over the summer. More details to come!

❖ **News from NCIPH/SPH**

- Annual Minority Health Conference *"Truth to Power: Exercising Political Voice to Achieve Health Equity,"* Friday, February 28th, Friday Center, Chapel Hill. Registration is closed; waiting list created
- 80th Anniversary of Gillings School of Global Health in 2020
- Dr. Taya Jackson Scott new Vice Dean at Gillings School of Global Public Health
- NCIPH Strategic Planning Process
- Becoming Better Messengers Training Update

Eastern District of NCPHA: Wes Gray

Annual meeting dates: April 29, 30, and May 1 in Nagshead, hotel rooms are still available.

Meeting Adjourned

Motion was made to adjourn, seconded, and passed unanimously. Meeting was adjourned at 10:35 am.

Next Meeting – March 19, 2020 at 9:30 am Location: DPH, Cardinal Room, 5605 Six Forks Road, Raleigh, NC