## Columbus County Board of Health

## **Minutes**

🔀 Regular Meeting	Special Meeting
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August 28, 2024 6:00 P.M.

## Columbus County Health Department, 304 Jefferson Street, Whiteville NC

<b>Members Present</b>	Pat Ray	
	Dr. Randy Kirby	
	Frankye Boone-Newkirk	
	Shane Cartrette	
	Patty Hobbs	
	Dr. Brent Lawson	
	Dr. Nicole Martin	
	Dr. Christy Perdue	
	Dr. Amy Sessions	
Members Absent	Drew Cox, Scott Floyd	
Staff Members	Kimberly L. Smith, Yvonne Armstrong, Daniel Buck, Charlene	
Present	Bush, Jamika Lynch, Haleigh Milligan, Patti Nance, Kristie Priest	

## Quorum was present.

### I. Call to Order

Pat Ray called the meeting to order at 6:00 p.m.

### II. Welcome/Invocation

Pat Ray welcomed everyone to the meeting. Invocation was given by Pat Ray.

## III. Approval of Agenda

Kim Smith stated she would like to add the West Nile Virus Update. This will be presented first under Nursing, and Haleigh Milligan, ERRN will be giving that update. Motion to accept the agenda, with the addition of the West Nile Virus Update, was made by Dr. Randy Kirby, seconded by Dr. Amy Sessions, and carried by the board.

### IV. Public Comment

There were no public comments.

### V. Approval of Minutes

Motion to accept was made by Patty Hobbs seconded by Shane Cartrette, and carried by the board.

## VI. Financial Update

Charlene Bush, Budget Director stated the following:

## A. Financial Statement June Annual

(Benchmark 33, Activity 33.6) (Benchmark 39, Activity 39.2)

- In your packet, you received June's Financial Report. This was the end of the Fiscal Year for the county. Are there any questions?
- The annual shows July 1, 2023 thru June 30, 2024. This is what we ended up with, based on what we had budgeted for.
- Next, you will see the Year to Date review. We finished up at 101% of total revenue received. We used 77% of what was budgeted of local appropriations. Expenditures were a little over one million dollars from what we had budgeted.

Motion to accept Financial Statement for June was made by Dr. Randy Kirby, seconded by Dr. Amy Sessions, carried by the board.

### **B.** Service Cost Update

(Benchmark 39, Activity 39.2) (Benchmark 33, Activity 33.6)

- RSV for adults is \$308
- Gardasil is \$312
- Shingrix is \$222 per dose
- Vaxelis (Diphtheria & Tetanus Toxoids & Acellular Pertussis) \$163
- Administrative Fee went from \$24 to \$25
- The Moderna COVID-19 Vaccines
  - o 6 month old to 5 years is \$79
  - o 5 years old to 12 years old is \$98
  - o 12 years and up is \$154
  - RSV for Pediatrics is \$562

### C. Funding Update

(Benchmark 33, Activity 33.6)

- This funding update is for July and August.
- Our COVID vaccine program, I did not budget for in our fiscal year budget, because we did not know we were going to receive it, until it was there. We have received \$56,996. This amount was what we had left from last year, and they rolled it over to this year.
- ARPA funding is \$100,000.
- WIC has two pots of additional funding, totaling \$29,895. If you can remember back, when I was first discussing the budget, the WIC program was cut. Sandy Cothern (WIC Director) wrote for a grant, to help get new computers and to help pay for their part time Nutritionist.

- For the COVID Bridge Access Program, we have received \$57,399. This is more rollover money. This is to help individuals without insurance.
- We also received \$264,924 for Public Health Infrastructure. Last year we received this, and we did not use any of it. We have until October of 2027 to use it.

Kim Smith stated that the other amounts of money would expire at the end of this fiscal year (June 30, 2024). Dr. Amy Sessions asked what we were going to use all this money on. Kim Smith responded that with each of these funding sources is an Agreement Addendum with the State. Within those addendums, the State gives strict guidelines as to how, and when, these funds can be used. That is like the COVID Bridge Access Program, it is to be used for individuals who do not have insurance or underinsured, to cover the cost of their COVID-19 vaccine. Dr. Amy Sessions asked if they knew, as of now, what they were going to use the ARPA funding for. Charlene Bush responded for any travel or meetings we have. The county will not pay for travel now, unless you have other funding to cover it.

Dr. Amy Sessions asked what was PH Infrastructure. Kim Smith responded that is Public Health Infrastructure; and it goes towards workers, employees, trainings, and I believe if we wanted to give our employees incentives or bonuses. It is very restricted.

## D. Patient Counts June Annual

(Benchmark 33, Activity 33.6)

Starting this past October, they started including all
of the TB (tuberculosis) cases under TB. Therefore,
you will notice the Adult Health count has dropped.
 Kim Smith stated this was for anyone who comes in for a

TB skin test, not that they have TB, but if they have to have one for work or school, they are not put under TB. Charlene Bush continued:

- We saw a few more patients this year, than we had last fiscal year. Are there any questions?
- E. Environmental Health, Child Fatality, Family Planning, Maternal Health, Communicable Disease/STD-Budget Reviews (Benchmark 33, Activity 33.6)(Benchmark 39, Activity 39.2)
  - Environmental Health, local county money was \$479,246. Local fees they took in, \$195,000 for last year. Lead money from the State is \$3,566.
  - Dental funding, coming from Medicaid is

\$110,450.

- County appropriations is \$357,372.
- Duke Endowment Grant is \$150,000.
- Child Health Grant of \$30,000. This grant comes to the children's health department here, and I just roll \$30,000 to Dental. This covers any child that falls through the crack, where their parents do not have insurance or Medicaid.
- The \$1,250 is where every once in a while, we will have a parent with insurance or their parents will pay on it.
- Family Planning funding we receive \$73,080. I
  have that in the packet and it is itemized to show
  you exactly what we use that money for. It is
  \$2,070 less than last year.
- Maternal Health State funding we receive \$93,421.00 and 40% of that goes to the nurses salaries. There is not a lot of stipulations on this, but I do use it for salaries.
- Child health funding is \$71,840; in your packet, you can see how it is broken down.
- Communicable Disease we get \$47,912. TB
   Control is \$31,897; this is not nearly enough for
   TB. STD prevention, we get \$100 to buy condoms
   with. You can look at the rest in your packet for the
   breakdown for HIV / STD and for surveillance
   services.

Kim Smith stated that out of the programs Charlene has gone over, Environmental Health, Family Planning, Maternal, Child Health and Communicable Disease, these are all mandated services. If we received \$1 from the State, then the county would have to cover the rest.

Haleigh Milligan, Adult Health ERRN gave the following update:

#### A. West Nile Virus (Benchmark 39, Activity 39.2)

- We have a cluster of West Nile cases in the county. In the past two in a half weeks, I have learned a lot about mosquitos, so I'm going to share this information with you.
- Female mosquitos are the only ones who bite. They use human blood as a source of protein to lay their eggs. Mosquitos have a very quick life cycle. From the egg to a full-grown mosquito, takes seven days. There are around 200 different types of mosquito species in the United States. Not all carry diseases, only certain ones.

VII. Nursing

- West Nile Virus is transmitted when a mosquito bites an infected bird, and then turns around and bites a human. It is the lead mosquito borne illness in the United States right now. Someone can be infected with West Nile and be asymptomatic. Milder cases mimic common illnesses like a stomach bug, including fever, vomiting and just overall feeling yucky.
- About one in fifty patients develop a potentially life-threatening illness that causes inflammation of the spinal cord, like meningitis or encephalopathy. It can also affect your breathing, causing you to have to be put on a vent.
- Right now, there are no vaccines or medication to prevent West Nile.
- We currently have three cases. The first is a 57-year-old male who lives in the city limits of Whiteville. He was diagnosed on July 31<sup>st</sup>. The second case is another male, 68 years old, who lives in Whiteville city limits and was diagnosed on August 12<sup>th</sup>. Our third case is another male, 65, who lives in Whiteville city limits and was diagnosed on August 16<sup>th</sup>. All three of these gentlemen were tested five to six days between each other. They have tested their spinal fluid. After looking at their medical records and speaking with their spouses, to get a bit more history on them, it's highly likely they were all bitten in Columbus County before Tropical Storm Debbie.
- They did require hospitalization and were classified as having a neuro-invasive disease. This means they had all the symptoms: mental status, muscle paralysis and encephalopathy. When I called Monday, two were moved to rehab, and doing better, and on the third case, I have not heard back from him or his spouse. As of last week, he was still on the vent.
- We have done various things to get the word out to the public, such as a social media campaign on Facebook, which got those mosquito prevention tips out there, to the public. We also let the public know that mosquito dunks were still available at Environmental Health. We have sent memos to our healthcare providers, to just be on the lookout when patients present with possible symptoms. In addition, we just submitted a press release to the

- local area news outlets.
- Last week, our vector-borne division had a State entomologist; we picked out different locations within the city limits, as well as a few on the outskirts to compare the two. He has been coming and going in the last week. We have used our smartboard to see what areas would be best to use. Mosquitos tend to love stagnant water and wooded areas.
- The Culex mosquito is the one primarily known to carry West Nile Virus. We have been able to trace several of these mosquitoes. He was supposed to start today to dissect them and see just how many are infected with West Nile. I hope that tomorrow or Friday, we should have some results on that.
- The county and Whiteville City have been spraying. We have also set traps, and it has helped as far as bug collection goes. The city of Chadbourn will be spraying on Thursday mornings, weekly, from 3 am to 6 am.
- Please wear bug spray and empty any pots of standing water around your home.

Shane Cartrette asked if the Health Department was paying for the spraying. Kim Smith answered that the county pays for the spraying. We have not had any funds from the State in ten to fifteen years for spraying. Facility Services staff actually goes out and does the spraying. The complaints come into Environmental Health, then they relay those messages to Facility Services, and then they go out and spray the area. At the end of last week, they had three trucks spraying. They used all of the chemical the Health Department had in the budget for last year. They have already had to buy one batch, which was \$13,000 and they have had to put in a request to purchase more. Shane Cartrette asked if there would be any aerial spraying. Kim Smith answered no because that would be around \$1.5 million, and the county would have to pay for that. The other issue is the amount of water the county has, much of the county would not be able to be sprayed. Patti Nance, Director of Nursing, gave the following updates:

### B. Child Health Update (Benchmark 39, Activity 39.2)

 We are fully staffed. I have one nurse about to start the Enhanced Role class for Pediatrics. Our other nurse is able to do Well Child visits. Numbers seem to be getting larger in that clinic. Kim Smith asked Patti Nance to elaborate on the struggle she has had finding a preceptor for the Pediatric Nurse. Patti Nance stated:

• Getting a preceptor for our other nurse, we have to have an advanced practice provider and a Child Health Enhanced Role Nurse to agree to be preceptors. The Advanced Practice Provider must be an NP or PA. We thought we would be able to use Bladen County again, but their preceptor was not going to be in the office enough for her to get her time in for the class. I went on a search, and after about twelve counties, we were able to get a preceptor in Harnett and Lee County. So, she will have to split up her time between the two. She will have to do 30 Child Health visits, which have to cover certain age ranges, and five within each age range.

## C. Communicable Disease Report (Benchmark 2, Activity 2.4)

• In your packet, what I submitted, you can see everything that was reported for 2023-2024, along with all of the Communicable Diseases Haleigh has to be versed in. These are all of our confirmed and probable cases. This is in comparison to 2021-2022 and 2022-2023

## D. Maternal Characteristic Report (Benchmark 19, Activity 19.1) (Benchmark 39, Activity 39.2)

- This is the number of Maternity patients by age. Due to COVID-19, the numbers dipped from 2020 to 2022. They increased slightly in 2022-2023, and we are at 145 for this fiscal year.
- Maternal Health patient visits per Fiscal Year. They had 145 patients and 845 visits of those patients.
   The number of appointments they have varies from patient to patient. That number is up.
- Patients by age: Our youngest is 15, and the oldest is 40 to 44 years old.

## E. Family Planning Services (Benchmark 19, Activity 19.1) (Benchmark 39, Activity 39.2)

- We have had 428 patients with 837 visits. These visits range from annual medical to a maternity patient who is now post-partum.
- Patients by age, youngest is 14 and oldest is 59.
- Family Planning by race and ethnicity. This gives you a breakdown of the patients we are seeing. The past year we've had:
  - o American Indian = 6

- O Black / African American = 41
- $_{\odot}$  White or Caucasian = 275
- For Maternity:
  - o Black / African American = 52
  - o White or Caucasian = 92
- F. Maternal Health Update (Benchmark 19, Activity 19.1) (Benchmark 39, Activity 39.2)
  - Total births at Columbus Regional was 380 for the 2023 to 2024 fiscal year.
  - 62 were our patients here; for a total of 64 to deliver.
  - 20 of our patients transferred to New Hanover specialist or Wilmington Health OB
  - 2 Home Births
  - Additional patients transferred to McLeoud, Craven, Cape Fear Valley or Baldwin Woods
  - 10 Miscarried
  - Other Preg Outcomes 2
  - Moved out of area 3
  - Lost to follow up 3
  - Columbus County Health Department births at Columbus Regional 62
- G. Adult Health Update (Benchmark 19, Activity 19.1) (Benchmark 39, Activity 39.2)
  - These are our STD numbers
  - We have chlamydia, gonorrhea, NGU, syphilis, and PID.
  - Up until this year we had not been able to access our syphilis and HIV numbers. We cannot enter the information, but we can access the data.
  - Our Adult Health nurses have had to work on 402 cases and 25 probable cases of STD. If the patient was not seen here, we get the report from the doctor's office or outlying facilities, and they have to follow up with the patient and record their treatments.
  - We are not able to access AIDS data. We have to pull it from the website as the State puts it out. We have had three HIV cases that, in their initial findings, were in the AIDS state. You can see the totals for the past couple of years on the right-hand side. We have already had three the first quarter of this year.
  - I have sent you a graph of our TB numbers from 2021 to this year. This year we have had four actual TB cases and 17 latent TB cases. Of the four, after

receiving this data from Renee' (Pridgen), two were currently in the middle of direct observation therapy. One of the four has completed. The fourth one should be near completion. The ages were 13 months old, 12 years old, 19 years old and 34 years old.

The 17 latent TB cases, eight were contact cases and nine were due to other reasons; like if they needed a TB skin test for work, and it popped up positive. Eleven of these individuals declined treatment; two started treatments. One has completed treatment for latent TB. There are three doing what they call window prophylaxis. The ages at the time of starting treatment were nine months old, three, four, twenty-two, twenty-three, twenty-four, twenty-six, thirty-four, thirty-eight, forty, fifty-one, fifty-four, sixty-two, and eighty-one years of age.

• The last thing I have for you is rabies. We have had to treat no one in relation to bites. We have had 16 bites reported. Fifteen were dogs and one cat. We have done some rabies prophylaxis for animal control for that.

Kim Smith stated that we were able to do that for our animal control officers out of one of the funding pots we received.

### VIII. Environmental Health

Kristie Priest, Supervisor, stated the following:

A. Environmental Health Staff Update (Benchmark 37, Activity 37.6)

• We are now fully staffed. It has been a long time coming. Connor Ward and Eli Anderson were our last two hires. They are now authorized in Onsite and Wells; this is the majority of our caseload right now. Eli is registered to take his NEHA exam around the last of October first of November. He will take the first portion and then he can take the multiple-choice part later on at Southeastern Community College.

B. Food and Lodging Report (Benchmark 4, Activity 4.2)

- Our numbers are down this year, due to us being short staffed. Three people cannot do everything.
   We are getting better, and hopefully next year we will be back where we should be. For Food and Lodging Inspections we have the following:
  - $\circ$  Total Inspections = 276
  - Verifications = 26

o Intent to Suspend Permit =4

Motion to accept the Food and Lodging Report as presented was made by Dr. Nicole Martin, seconded by Dr. Randy Kirby, carried by the board.

C. Well Sampling Report (Benchmark 4, Activity 4.2)

- These numbers were up a little from the last fiscal year. Eventually the county's goal is to have county water to most citizens.
- For well construction permits issued, for the 2023-2024 fiscal year, we had 162.
- Well certificates of completion issued were 75.

• Water samples taken was 142.

Motion to accept the Well Sampling Report was made by Dr. Randy Kirby, seconded by Shane Cartrette, carried by the board.

 At the last commissioners meeting, they approved free well testing for flooded wells, after Tropical Storm Debbie, until September 7, 2024. So far, we have had one individual that his well was flooded.

Dr. Brent Lawson asked how would people know about this service. Kim Smith responded that it has been advertised on our webpage as well as the county webpage. Kristie Priest continued:

• Most individuals, who experience flooding, know the process by now. However, they will be able to get the fee waived until September 7<sup>th</sup>.

D. Onsite Waste Report (Benchmark 4, Activity 4.2)

• If you look at this graph, you can see that the blue line represents 2022-2023 fiscal year and the orange line is 2023-2024 fiscal year. We have increased a god bit with site visits. Brandon Grigsby, Jeremy Gore and some myself, did the majority of those visits until Eli became authorized. Environmental Health has been busy. The sites represented on this graph, are not including any of the new builds on the western end of the county.

Motion to accept the Onsite Wastewater Report was made by Dr. Randy Kirby, seconded by Dr. Nicole Martin, carried by the board.

Shane Cartrette asked how does Kristie Priest get the funding for more employees. Kristie Priest responded that we have to first justify the need; then Kim Smith has to go before the County Commissioners, after the Board of Health has approved it. This is what we did last year in order to bring Connor Ward on. With the budget cuts, they wanted to eliminate it, but we fought for it and were able to

save that position. It has been since 2011 since we have had this many Environmental Health Specialist. Kim Smith added that we have put in a position, for the current fiscal year, and the County Commissioners denied it.

Shane Cartrette asked if Environmental Health staff members were Health Department employees or County employees. Kim Smith responded that they are both. When Mr. Madden told me this position had been cut, I told him that this issue would take care of itself. He will get the call from the County Commissioners when we are six to eight weeks behind on inspections, because we do not have enough staff.

### E. Child Lead Report (Benchmark 4, Activity 4.2)

- We have only conducted one Lead Investigation. It was at a preschool, and they opted not to get a license from the State. So in doing that, they are not required to remediate the lead hazards. Since they are open less than four hours a day, Environmental Health is not required to do their inspection. They have not contacted me and let me know they have remediated their lead hazard.
- It was paint on a doorjamb where children would go in and out of every day. It is a simple fix and they still did not remediate it and stated they would stay at operating at four hours a day.
- None of the children had high lead levels.
   Motion to accept the Child Lead Report was made by Dr.
   Randy Kirby, seconded by Dr. Nicole Martin, carried by the board.

### F. EH Legislative Updates (Benchmark 15, Activity 15.2)

• Our restaurants are divided up into categories (1, 2, 3, & 4). Four being a large operation, like a buffet, a lot of processes going on. A category one is like a coffee shop that has reusable glasses. In October, the legislation was passed that these category four operations would be inspected three times a year, instead of four. With the fourth inspection, it will now be called an educational visit. It can be education that takes five minutes, fifteen minutes, it is not intended to be an inspection at all, but a time to speak with the operator and answer any questions they may have. We have to document what is being said and what we talk about. This became effective November 1st, 2023. At that educational visit, we will not post a new inspection

### IX. Quality Assurance

card; it will be done at the following visit.

Daniel Buck, QA Specialist I, gave the following updates:

### A. Quarterly Audit Results (Benchmark 27, Activity 27.1)

- The only issue we saw, we had a Maternal Health chart that was not compliant, and the COVID declination was not signed. We did a re-audit for June, and that turned out fine. You can see the number of records we pulled for each area.
- Then, we had documentation for Family Planning where pre-conception counseling was not documented or done. We did not do a re-audit on that; we just had a conversation with the person who was working on that chart to double-check that. This was for quarter one.
- In quarter two, in Maternal Health, we had a noncompliant chart. They requested a follow-up appointment, but it was not scheduled. The Director of Nursing followed up with the provider to work through that and see what was going on.
- For Pediatrics, they have had a lot of training going on with the nurses. They have been doing more Well Child checkups, but their auditing has been behind, because they are learning how to go through all that stuff. We did not get that in before it was time to send out the packets, but it went fine. I will have an updated sheet for the next meeting.
- Colposcopy had a chart that did not have any pregnancy test results and that was resolved. A lot of our findings are with the charts.
- Dental audit is pending; due to turnover. So by October I should have this for you.

Motion to accept the Quarterly Audit Results was made by Dr. Randy Kirby, seconded by Shane Cartrette, carried by the board.

### **B.** Accreditation Update

The State has given us a good faith effort on getting 80% of our benchmarks uploaded to the dashboard by November 1<sup>st</sup>. Then we have until December 9<sup>th</sup> to get anything else in. After that, our dashboard closes up until our site visit, which is in early March. The Management Team has completed a majority of their benchmarks, and we are starting to upload them as quickly as we can. Now we are just making sure we have all of the evidence lined up for what they are looking for.

Kim Smith stated for our site visit, we are going to need

two to three Board of Health members to be interviewed. Our dates are on Wednesday and Thursday. I think the site visit will be on Wednesday. They have all of our documentation up front.

Pat Ray stated she would be glad to volunteer.

Dr. Randy Kirby stated if his schedule permitted, he would be glad too.

### X. Health Education / Promotion

Jamika Lynch, Health Educator, gave the following updates:

A. Community Health Assessment Review (Benchmark 1, Activity 1.1; Benchmark 38, Activity 38.2)

Jamika Lynch gave a Power Point presentation on the Snapshot for the Community Health Assessment (CHA). During the presentation Kim Smith reminded the Board of Health that Columbus County is considered an aging county, with the largest population age group being 65 and older.

Jamika Lynch continued:

- Our first priority is obesity. It affects a lot of adults here and in the State. Excess weight may indicate an unhealthy lifestyle and puts individuals at risk for further health issues.
- Priority two is substance use. Medication and drug overdose deaths have increased dramatically in the last five years.
- Priority number three is lung cancer. Lung cancer was the leading cause of cancer deaths in North Carolina.

Kim Smith stated that we have a partnership with the Levine Cancer Center, who is connected with Atrium Hospital in Charlotte, NC. They provide the Lung Bus and the staff. As soon as they notify us, that they are coming to the area, we spread the word. They do screenings if you lack insurance, have Medicaid or are underinsured, have a 20 pack-year smoking history, or if you currently smoke or have quit smoking in the past 15 years.

Kim Smith continued to state that the Opioid Task Force has agreed on a marketing plan for Nicole Hopkins and her work. I hope that you will start to see this around mid to end of September. If you have a group of people you would like for her to come and speak with, she would be glad to.

Jamika Lynch continued:

 Lung cancer is the leading cancer in Columbus County; followed by prostate, breast, colon and lastly kidney cancer. What we are currently doing,

	is I am trained in a vaping education program. I am excited to get back into the schools and teach this. By educating the students and parents, hopefully we can turn this around.  • There were 27 questions on the survey. 83% of participants were female. 47% of the respondents live within the zip code of Whiteville. 69% of these individuals consider themselves White / Caucasian. This survey was distributed throughout the county. We are not getting the responses we had hoped for. Kim Smith stated that Jamika will send out the link to this new website, that the State provides, it really lays it out regarding food deserts and housing. https://dev.nc.datahubs.org/
XI. Chairman's Forum	Pat Ray, Chairman gave the following update:
Al. Chairman s Forum	I do not have anything tonight.
XII. Director's Forum	<ul> <li>Kim Smith, Health Director gave the following updates:</li> <li>A. Bad Debt Write-Off (Benchmark 33, Activity 33.7)</li> <li>In front of you you'll see highlighted in yellow, for the previous year (July 2023 – June 2024) we have \$3,824.38. This is self-pay that we are unable to collect.</li> </ul>
	Motion to accept the Bad Debt Write-Off for July 2023- June 2024, was made by Patty Hobbs, seconded by Dr. Christy Perdue, carried by the board.  • Under July 2022 to June 2023, you will see the Bad Debt Write-Off from Medicaid and private insurance, it is \$ 31,208.30. Our charge might be \$100, private insurance may only pay \$50. We bill our charge but they won't pay.
	<ul> <li>Motion to accept the Bad Debt Write-Off, for July 2022-June 2023 was made by Shane Cartrette, seconded by Dr. Christy Perdue, carried by the board.</li> <li>B. Debt Set-Off (Benchmark 33, Activity 33.7)</li> <li>This is where we actually recover unpaid funds. When you come in for services, we have your social security number on file, so if you do not pay, we can have it taken out of your taxes. We have to notify you thirty days in advance, and you are placed on a list. If within that time you do not come in and pay it, then that list goes up, and the State of North Carolina helps us collect. This past fiscal year we collected \$4,222.21.</li> <li>Motion to accept the Debt Set-Off, was made by Dr. Brent</li> </ul>
	Lawson seconded by Patty Hobbs carried by the board

Lawson, seconded by Patty Hobbs, carried by the board.

- C. Fee Increase for Mirena IUD (Benchmark 33, Activity 33.5)
  - When we found out our Mirena IUD price was going sky high, doubling in price, this is where we sent out the email vote on July 24, 2024. It was passed 10 to 1. This is our cost. We charge what we receive it for. If you were to go to an OB's office, the patient would not be receiving it at cost, as we do here. We had to send the email request due to it having to go before the County Commissioners for approval as well. To make sure it is clarified and documented; we want to make sure we discuss it tonight.
  - It has went from \$165.61 to \$350.44; this is our Medicaid rate, and our non-Medicaid rate, for private pay or private insurance will be \$420.44. Are there any questions regarding this change?

Motion to accept the Fee Increase for Mirena IUD was made by Dr. Nicole Martin, seconded by Dr. Randy Kirby, carried by the board.

### D. Vital Records Update (Benchmark 2, Activity 2.1)

- Brandy (Burge) our Registrar, here at the Health
  Department, says deaths, births and homebirths
  have gone really well. She has not run in to many
  issues with the funeral homes. They have been able
  to work through the issues with the help of the
  State.
- We have had two homebirths. They come in, complete the paperwork, Yvonne (Armstrong) notarizes the documentation and it is sent up to the State. If you have a CNM or Doula, it is not as complicated, because they usually have all of the information they need already.

# E. 2025-2029 Strategic Plan Update (Benchmark 15, Activity 15.1)

Kim Smith presented the Power Point Presentation of the 2025-2029 Strategic Plan.

- I enjoyed the process we used this time, for coming up with our Strategic Plan. We were able to use some of our ARPA funds to have two knowledgeable staff members from UNCW, to come down and work with us on this.
- We had a lot of good team building exercises. The finished product, we came up with a new Mission Statement, and a new Vision Statement. We had eleven people around the table that agreed that

these two statements needed to be direct and to the point. We will start putting this out in the community and on our website if you all will agree to this.

- We reviewed all the data that Jamika had included in the CHA. Our focus areas are:
  - O Staff Recruitment & Retention
  - o Obesity
  - Public Awareness of Health Department Programs
  - o Facility & Infrastructure
- On the last page here, I wanted them to make sure the women from UNCW included the plaque that is on our outside wall, which says this building was built in 1938. Any time it rains, this building leaks. I am sure they spend more money on ceiling tiles and replacing ceiling tiles, more so than anything else. I have a file about two inches thick of photos and damages around here. Anytime I get to have a discussion with the County Commissioners, this is what I bring up, that we need a new building. Rep. Brenden Jones came in the EOC during Tropical Storm Debbie, and I spoke to him persistently about a new building. With the help of Commissioner Watts, because he owed me a favor, I got my 15 minutes with Rep. Jones.
  - Our other two focus areas are:
    - o Substance Abuse
    - Lung Cancer
- Then we came up with our SLOT Analysis. This is how we came up with our strengths, limitations, opportunity, and threats.

Dr. Brent Lawson asked if the Strategic Plan had been shared yet with the County Commissioners. Kim Smith replied not yet, but it will be.

### Kim Smith continued:

- We came up with some long-term goals and strategies, which Yvonne (Armstrong) and I have already been working on.
  - o Obesity: working with our Faith Based Groups.
  - o Increase Public Awareness. I can educate with some of our ARPA funding.
- Unfortunately, I do not have enough money to get a new facility built. That is going to take a lot of work on everyone's part. We have had more than

one sit down conversation with the County Manager; so we will keep working on this goal.

- Substance Use: we are going to work closely with the Opioid Task Force here in the county. This should move forward a bit more, once we get our PR campaign out there.
- Lung Cancer: you heard Jamika (Lynch)
  mention about "Catch My Breath". We
  were actually approached by the schools to
  see if we had anyone who could come out
  and speak to the kids.
- I will have Yvonne send this out to you all, so you can see what we will be working towards, for the next four years.

Pat Ray stated she was delighted to be a part of the Strategic Planning process. I commend the staff on their Teamwork on this tremendous piece of work. Kim Smith stated the following:

We reviewed all of the data from the CHA, and this
is supposed to be in combination of that. I think
how this process went, the Strategic Plan was
completed the correct way.

Motion to accept the 2025-2029 Strategic Plan was made by Dr. Randy Kirby, seconded by Dr. Christy Perdue, carried by the board.

### F. Update on Vape Shop Rules (Benchmark 14, Activity 14.3)

• Ernest Watts, our Regional Tobacco Specialist, and myself, sat down with Robert Lewis, the Whiteville City Planner. He loves the idea of limiting the vape shops in the city. Ernest passed on to him several cities who put this in their planning. Robert said he has a Planning Board meeting in September. He will include the text in the city's zoning plans and in October, it will go before the City Council.

Dr. Brent Lawson asked if there was a State ordinance or law that limits the distance these vape shops can be to schools. Kim Smith replied no it is a local thing. Kim Smith continued:

• The vape shop out by the high school, if he owns that building, and then the City of Whiteville puts in an ordinance to ban vape shops, and the original occupant stops doing business there and Dr. Kirby decides to move in and start running a vape shop, then the City will be able to stop Dr. Kirby.

However, if the business is already there, we cannot do anything about it. Only new businesses / ownership, after the ordinance is passed will be affected.

Dr. Brent Lawson stated but you cannot eliminate the occupants that are there now. Kim Smith answered that is correct. Educating the public and hopefully with Jamika (Lynch) going into the schools, it will make a difference. My plan is to get the largest city in the county on board, and then move on to Tabor City and Lake Waccamaw. I hope that we will accomplish a lot.

- G. Dental Update (Benchmark 19, Activity 19.1)(Benchmark 39, Activity 39.2)
  - Dr. Graham, you all probably remember her as Dr.
    Ladner, she has come in, and she is making things
    hers. We have been able to transfer one of the Front
    Office Staff members to become the Dental Office
    Assistant; this will be effective September 3<sup>rd</sup>. She
    is one of our Spanish speaking interpreters, so she
    will also help interpret.
  - We are trying to get the bus in shape. We have had the oil changed, tires checked and paperwork all ready to go, to hand out in the schools. It looks like they will be starting at Whiteville Primary.

Kim Smith stated that she has one other announcement:

• Tonight was Patti Nance's last meeting with us. She has resigned. Her last day will be this coming Friday. So I am looking for a Director of Nursing. You do not have to have your Masters. You can have two years, with public health experience, along with supervisory experience. If they have a combination of different experience, this could possibly qualify them through the State; but we have to send a prospective candidates CV, transcripts and job history to the State for approval.

Comments-Board of Health

Next Meeting Date October 23, 2024 at 6:00 pm

Meeting Adjourned

Respectfully submitted: <u>Himbury Nomith</u> Secretary 102314

Signature Date