

Columbus County Board of Health

Minutes

☒ Regular Meeting ☐ Special Meeting

May 1, 2024 6:00 P.M.

Columbus County Health Department, 304 Jefferson Street, Whiteville NC

Members Present	Pat Ray Patty Hobbs Dr. Amy Sessions Dr. Brent Lawson Dr. Nicole Martin Dr. Christy Perdue
Members Absent	Dr. Randy Kirby, Drew Cox, Frankye Boone – Newkirk, Shane Cartrette, Scott Floyd
Staff Members Present	Kimberly L. Smith, Yvonne Armstrong, Daniel Buck, Charlene Bush, Kristie Priest, Mitzi Ward
Guests	

Quorum was present.

I. Call to Order

Pat Ray called the meeting to order at 6:07 p.m.

II. Welcome/Invocation

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

III. Approval of Agenda

Kim Smith asked if we could table Nursing A, B and C; and Social Work as well. A motion to accept, with the changes stated, was made by Dr. Christy Perdue, seconded by Dr. Amy Sessions, and carried by the board.

IV. Public Comment

There were no comments from the public.

V. Approval of Minutes

Motion to accept was made by Dr. Amy Sessions, seconded by Dr. Nicole Martin, and carried by the board.

VI. Financial Update

Charlene Bush, Budget Director stated the following:

A. Financial Statement January, February, and March

(Benchmark 33, Activity 33.6)

- For the Financial Statement, you should have January, February and March.
- The Year to Date is dated for July of 2023 to March of 2024. You can see the percentages of where we are at:
 - Total Revenue = 64%
 - County Appropriations = 47%
 - Expenses=65%

Motion to accept Financial Statement for January, February and March, was made by Patty Hobbs, seconded by Dr. Brent Lawson, carried by the board.

B. Service Cost Update *(Benchmark 33, Activity 33.6; Benchmark 39, Activity 39.3)*

- There were none.

C. Patient Count January, February and March *(Benchmark 33, Activity 33.6)*

- In your packets are the Patient Counts for January, February and March.

Kim Smith stated the following:

- If you look at the COVID numbers, for the private insurance, the vaccines for children and for the Bridge program have gone down significantly.

Charlene Bush continued:

- Our patient count has dropped.

D. Care Coordination for Children Financial Update *(Benchmark 33, Activity 33.6)*

- In your packet I included the two Social Work programs. The first one is CMARC (Case Management for At Risk Children). We get \$649 of state funding for this program. This is to help service children under the age of five, who have no insurance. The Medicaid amount we are receiving comes to an average of \$ 10,922 per month. The number is calculated by taking \$4.56 per child, from the ages of zero to five, receiving Medicaid, in our county. I have no way of telling you if this number is correct. They do not provide me with information on how many children we have, from zero to five, who are on Medicaid. As they age out, they go off, and then new ones come on; so it is constantly changing.

Dr. Amy Sessions stated the following:

- You're not seeing these kids?

Kim Smith responded:

- No, that \$4.56 is a per member, per month payment. It actually goes up to four years and 360 days (pertaining to the

age of the child). If they are five years old, or over that 4 years and 360 day mark, then we cannot see them.

Charlene Bush added:

- Most of what the Social Worker's do with this, is help to place the children who are high risk, and help their parents find programs that they can utilize.
- Expenses are \$ 150,616.99. These are current expenses, as of January 31st. Our revenue is \$98,304. Therefore, we have had to utilize \$52,312 of local appropriated money. We should not have to fund this program. We are supposed to be getting enough money to fund this program. For the 2023-2024 budget, for local appropriations, I only budgeted for \$32,000; as you can see, we are already over that.

Dr. Brent Lawson asked the following:

- This \$4.56 per child, is this statewide.

Charlene Bush answered yes.

Dr. Brent Lawson added:

- Therefore, every county gets that amount of money.

Charlene Bush stated the following:

- Yes; so all of the counties are experiencing a shortfall with this.

Kim Smith stated the following:

- If I decide to give this program up, I have to give a 90-day notice to the state. Then the funds would be sent back to the state. They will re-allocate out the children, to surrounding counties, along with the funds. If they do not, then they will put it out to a private entity, and I do not see a private entity taking a loss.
- The Health Director's Association is looking to re-negotiate the \$4.56. It will be towards the end of 2025, that they will re-negotiate this.

Dr. Brent Lawson asked if we have to report this loss to the state.

Charlene Bush and Kim Smith both responded that the state is aware of this.

Pat Ray asked if the surrounding counties were in the same situation.

Kim Smith replied yes.

Pregnancy Care Management (*Benchmark 33, Activity 33.6*)

- This is the other program where we receive \$4.96 a month for every woman of childbearing age, on Medicaid, from age 15 to 46; but we service all of the high-risk pregnancies.
- Our social workers visit with them, help them get in touch with programs that can help them, which includes transportation to their OBGYN doctor.

Kim Smith stated the following:

- If a patient has not showed up, they (Social Workers) will go out to their house, and try to make a home visit.

- Local appropriations for this program was \$18,599. We are currently at \$21,148.

Kim Smith stated the following:

- Now in Charlene's favor, we received a raise last year; a 7% increase in wages. They do not have any money to buy anything.

Charlene Bush stated the following:

- If I charged them everything it takes to run an office, this figure would be much higher. The health department covers the running of their offices.

E. Child Fatality Financial Update (*Benchmark 33, Activity 33.6*)

- We get \$649 for that. This year she (Mitzi Ward) has ordered pack-n-plays and bedside bassinets with these funds. That way, any of the high-risk children, whose parents do not have a place for them to sleep when they bring them home, can benefit from this funding.
- After assessment, the social workers will come and see Mitzi if their client meets the qualifications. This also leaves a paper trail, in case proof is ever needed, as to how and under what circumstances, disbursement was issued.

F. Health Department Fees (*Benchmark 39, Activity 39.2 & 39.3*)

- We are proposing new fees for Environmental Health (EH). This is due to how busy they have been, and how busy they will be. We are able to charge a fee for credit cards. We cannot charge a fee here at the Health Department, but we can at EH, because it is not a state funded program. I hope that we will be able to recoup some of our credit card fees. Most of their deposits are debit and credit cards.

Kim Smith stated the following:

- The one that is highlighted Columbus, that is our current fee schedule.
- We compared our rates with Bladen, Duplin, Sampson, New Hanover, Brunswick and Onslow. These are the counties in our region.
- The next to the last column on the right, is our new proposed fees for the services. In addition, the one beside that shows the fees with credit cards.
- When we sat down to discuss the budget with county finance, the first thing they asked me was when we were going to go up on our fees. I told them we had one or two we needed to go up on. They stressed to me that we needed to go up on all of them. That is when I asked to see the fees from the counties in our region. Then Kristie (Priest) and I sat down and went over them, to see what we could increase them to.

Charlene stated the following:

- This would go before the county commissioners when they

look at our budget.

Dr. Nicole Martin asked what is the AOWE Permit.

Kristie Priest stated the following:

- That is an Authorized Onsite Wastewater Evaluator Permit. With the new rules that came into effect in October of 2023, you can now have a private source to evaluate your property, and that AOWE evaluator can issue a permit. By law, we have to keep that record, and we have to charge to keep that record. We can only charge \$35.

Motion to accept the increases, as presented, for the Environmental Health fees was made by Patty Hobbs, seconded by Dr. Christy Perdue, carried by the board.

G. 2024 / 2025 Budget (*Benchmark 33, Activity 33.2; Benchmark 39, Activity 39.2*)

- You can see here all the programs we have that I budget for, at the very beginning. There are some programs that I do not budget for, until after the new fiscal year has started. This is due to not knowing how much money we will receive, or it is a special program.
- The first sheet shows all of the special programs for the year. This sheet at the bottom shows figures where we are getting money from to cover the expenses for that program.
- What I have currently turned in, I have had to change twice; and this will be the third time. The total budget right now is \$5,798,734. Out of that amount, \$3,381,000 is what I have coming from local appropriations. The other \$2.4 million will come from funding that we have.
- The first thing we cut was all part time positions that were funded. The second cut was where we were trying to hire another Environmental Health Specialist. They have asked us to hold off on that position for three months, and then hire.
- The last thing, for the fourth year in a row, we have included getting the records scanned in Environmental Health. This has been cut each time, because we are always asked to cut something.

Kim Smith stated the following:

- I can tell you that the last meeting we had with county administration, they were 9 million dollars short. So many of our programs are mandated, and we get state funds for them.

Charlene Bush stated the following:

- State law obligates the county to cover a portion of our budget. Even if I budget, that the county is going to put \$25,000 in and we are going to put in \$25,000, and we actually make \$50,000, the county is still obligated to put that \$25,000 there. Then that \$25,000 is supposed to go to escrow for us, but that is not how it always works; but that is how it is

	<p>supposed to.</p> <p>Kim Smith stated the following:</p> <ul style="list-style-type: none"> • In this budget, we have one new full time position in Environmental Health and we have a part time lab person to make to full time. <p>Charlene Bush stated the following regarding the budget sheet from the packet:</p> <ul style="list-style-type: none"> • This sheet shows you the difference from last year. We received \$50,000 from ARPA funding; we do not know at this point if we are going to get any for this fiscal year. Like BCCCP (Breast and Cervical Cancer Control Program) has dropped \$3,750. A lot of our funding has gone down. We had the 543 COVID Detection money; it was \$318,000, and now that funding is gone. Those funds helped us out a lot with salaries. Salaries went in to that, when they were working those programs. <p>Motion to accept the 2024-2025 Budget was made by Dr. Nicole Martin, seconded by Dr. Amy Sessions, carried by the board.</p> <p>H. Staff Update (<i>Benchmark 37, Activity 37.6</i>)</p> <ul style="list-style-type: none"> • We have hired Gracealynn Miller. She is working with Mitzi (Ward) in billing. She primarily bills for Dental, but she is training with Mitzi to take her place when she retires. <p>Dr. Amy Sessions asked why WIC numbers have gone down. She emphasized how high their numbers were compared to now.</p> <p>Kim Smith stated the following:</p> <ul style="list-style-type: none"> • According to the state WIC folks, our numbers are down. It is amazing when all you have to do is pick up the phone, and then your funds are automatically loaded on your eWIC card, verses, you not having to physically come in to WIC. Overall, the whole nation's birthrate is down.
<p>VII. Child Fatality Update</p>	<p>Mitzi Ward, Child Fatality Coordinator gave the following updates:</p> <ul style="list-style-type: none"> • The state is moving the Child Fatality and Child Protection Team to one. We will not be required to review all the deaths as we have in the past. How they are going to divide the money, we do not know. There is some extra money out there, but they probably will not divide it up until January or July of 2025. These two teams already work together, because we meet with some of the same families. Last week at DSS (Department of Social Services), we had the Child Abuse Prayer Vigil. At one time, the state would release the child's age and cause of death. Now they only release the number of child abuse deaths caused by caregivers, which is 31 in the state of North Carolina. Thirty-one too many. • The state is behind in releasing their data. We just received the numbers for Columbus County. It is broken down by age and race. In the year 2022, from perinatal to car accidents with

	<p>the age group ranging from one to ten.</p> <ul style="list-style-type: none"> • For 2023, in the first and second quarter, we had no child deaths in Columbus County. At our meetings, we had nothing to discuss, and when the next quarter comes in, we will go from there. • As Charlene stated, I work with the Social Worker's in getting parents in need the pack-n-plays. We have a form that has to be completed, that way if we are asked to show what the funds were used for we have proof. This helps to keep the parents from co-sleeping with children.
VIII. Nursing	<p>Kim Smith, Health Director, gave the following updates:</p> <p>D. COVID Update (<i>Benchmark 40, Activity 40.1</i>)</p> <ul style="list-style-type: none"> • A brief COVID update, the last time any numbers were posted, was April 27th. The Emergency Room (ER) visits for respiratory viruses have gone down to 5%. Before, they were 5.4%. In our region, it is only 1%. Our region includes the counties we mentioned earlier. • The hospital admissions from ER visits that was last reported on April 27th, statewide, was as follows: <ul style="list-style-type: none"> ○ 722 admissions, which this number is down. ○ The week before was 920 • We still have take home test available. If anyone needs any, please send them our way. We have plenty. • On the patient visit count, no one is asking or coming in for COVID shots. <p>E. Highly Pathogenic Avian Influenza (H5N1) (<i>Benchmark 40, Activity 40.1</i>)</p> <ul style="list-style-type: none"> • It started in birds. They have now found it in dairy herds. It's been found in the following states: <ul style="list-style-type: none"> ○ Texas ○ Kansas ○ Michigan ○ New Mexico ○ Idaho ○ Ohio • Then in the middle of April, they found it in North Carolina. The counties affected are located in the middle, to the western part of the state. The risk remains low to the public. There is no concern for commercial milk. If you are an individual who likes to consume raw unpasteurized milk, there could possibly be a chance, the cow you got the milk from, was infected. • In Texas, they had an individual who had it. He has completely recovered and had pink eye. He tested positive, along with the cows also. There has not been anyone else reported to have contracted the H5N1 from dairy. • Cows do recover from this, but poultry, birds do not.

	<ul style="list-style-type: none"> • North Carolina is keeping a very close eye on this. I am sure some poultry had to be put down, but not cattle.
IX. Social Work	Social Work was tabled.
X. Environmental Health	<p>Kristie Priest, Environmental Health Supervisor, gave the following updates:</p> <p>A. Application and Permitting Process Update</p> <ul style="list-style-type: none"> • I am talking to you tonight about the Application and Permitting Process Update. I know it as the BAR law, but it is Session Law 2023-129. In Columbus County, this does not typically affect us. Private bars were not required to have a permit from Environmental Health (EH). This was due to them serving just peanuts, or whatever they serve at bars. The bars we have in our county are bars within the restaurant, like San Jose or San Juan. • Typically private bars were not required to have a permit from EH. They've decided that definition was broad, and have narrowed it down to say a bar is an establishment with a permit to sale alcoholic beverages and that they do not prepare or serve food, other than beverages, garnishes, ice or food that does not require time or temperature controls for safety. • We regulate the food, not the bar. The BARs law has not affected us, as of right now. It may in the future, depending on the growth we get. • Are there any questions? <p>Kim Smith stated the following:</p> <ul style="list-style-type: none"> • I just wanted to say that we have a clerk position open, and I am asking if you know of anyone, please send them our way. We thought we had someone in place; then we ended up with a snap up at county HR. After we got that cleared up, and tried to call her today, she called us back and let us know that she was no longer interested. <p>Kristie Priest stated the following:</p> <ul style="list-style-type: none"> • Please, if you know someone, send them our way. We are not a bad crowd to work with. It would be clerical, filing, scanning, taking money; it is full time pay, with county benefits. We are in desperate need. • We will be starting SmartGOV on June 1st. The other departments started April 30th. This will allow anyone to pull up the application, complete it, and submit it online. Once they get the bugs worked out, I think it will be good. <p>Kim Smith stated the following:</p> <ul style="list-style-type: none"> • This was not what we had picked out. <p>Kristie Priest stated the following:</p> <ul style="list-style-type: none"> • This software was not built for EH. They have had to add a lot on the backend for it to work for us.
XI. Quality Assurance	Daniel Buck, QA Specialist gave the following updates:

	<p>A. Quarterly Audit Review (<i>Benchmark 27, Activity 27.1</i>)</p> <ul style="list-style-type: none"> • It's with the same sheet you received last time. Thankfully, it was completed and we didn't have any corrective actions. This was for the last six months. • We've pulled five charts from each service clinic. Everything has been looking pretty good. Quarter one, for this year, ended the last day in March. It usually takes about six weeks to get them done. <p>Motion to accept the Quarterly Audit Review was made by Dr. Nicole Martin, seconded by Dr. Amy Sessions, carried by the board.</p> <p>B. New / Revised Policies (<i>Benchmark 15, Activity 15.3</i>)</p> <ul style="list-style-type: none"> • We have revised the ones on the list, from fiscal year 2022 to 2023 by area. Then you have the current fiscal years revised policies that have been reviewed. A lot of this is due to preparation for accreditation. Any questions?
XII. Chairperson's Forum	<p>Pat Ray, Chairman, gave the following update:</p> <ul style="list-style-type: none"> • I do not have anything to report on, except to Dr. Lawson, we want to express our sincere condolences on the loss of your mother. She was certainly loved, that was apparent. <p>Dr. Brent Lawson thanked everyone for their sincere kindness.</p>
XIII. Director's Forum	<p>Kim Smith, Health Director gave the following updates:</p> <p>A. 2024 County Health Rankings (<i>Benchmark 38, Activity 38.1</i>)</p> <ul style="list-style-type: none"> • In your packets, you have information on the county health rankings. It was released towards the end of March. The big change this year is that they were not ranked by numbers. You have this nice chart, with a circle, and it shows Columbus County. I cannot tell you that we went up or down. We are still in the bottom lower territory. The length of life and the quality of life are health outcomes. Again, it says we are faring worse than the average county in North Carolina, and worse than the average county in the nation. • Health outcomes tell us how long people live on average, how much physical and mental health people experience in the community where they live. The health outcomes are affected by many factors such as: <ul style="list-style-type: none"> ○ Clean Water ○ Quality of Healthcare ○ Availability of Good Jobs ○ Affordable Housing • The health outcomes include: <ul style="list-style-type: none"> ○ The Length of Life <ul style="list-style-type: none"> ▪ Premature Death or Life Expectancy ▪ Infant Mortality ○ Quality is self-reported physical and mental wellness. • Length of life is defined as being years of potential life lost

before the age of 75. For someone who passes at 60, that is fifteen years that are counted against us. If they pass away at 78, that does not count.

- This is the first part of the report. The second part is the Health Factors. These represent things that we can improve on to help us live longer and healthier lives. They include:
 - Smoking
 - Obesity
 - Food Environment
 - Physical Inactivity
 - Access to Exercise
 - STD's
 - Alcohol Deaths
 - Uninsured
 - How many Primary Care Providers there are.
 - Dentist
 - Mental Health Providers
 - Whether you get a flu vaccine every year.
- Especially your physical environment, drinking water, and housing problems. I do not know why, but they include driving alone to work. Then they count the long commute. I was hoping we would have had a number to show if we went up or down. If you go into the website and play around with the stats, it shows that Robeson County comes up being the unhealthiest.
- With these health rankings, there is nothing I can physically do about the air or the rivers. Just Google county health rankings if you want to view them for yourself.

B. Updated Policy Staff Development and Training Policy

(Benchmark 37, Activity 37.6)

- The big thing that was changed with this policy was the Enhanced Role nurses and what they have to do, as well as the primary backup Communicable Disease nurses; same with the TB nurses, and all of the training all STI nurses need to have and our Child Health Enhanced Role Nurse. She (Patti Nance) took some time to update this.
- This policy changes due to education requirements our staff has to have. Sometimes it is due to our different agreements we get from the state.

Motion to accept the Updated Staff Development and Training Policy was made by Dr. Brent Lawson, seconded by Dr. Nicole Martin, and carried by the board.

C. Evaluation of Need for New or Amended Local Rule

(Benchmark 34, Activity 34.4)

- We have to be able to show, as a Board of Health, that we have done some type of evaluation and feel that there are no

new amended rules, or ordinances, that are needed.

- I can tell you that Ernest Watts has messaged me about talking with the townships, here in Columbus County, and seeing if there is some way of limiting the number of vape shops. He sent me some information today; Jacksonville and Shallotte are two towns that have already done this. They did not do it through their health department; they did it through their planning department and their city council. What he sent me is the same for both cities. It puts limits on where a vape shop can be located. It cannot be within 1,000 feet of schools, daycares, a church, those types of establishments. If the vape shop changes ownership, they are not grandfathered in; they have to abide by the same rule. I thought maybe I would start with the City of Whiteville. It has one right across from the high school. Maybe talk with their city planner and see what their interest would be.

Patty Hobbs stated that the gas stations are also selling these vapes.

Dr. Brent Lawson added that they had went to Williamsburg (VA) and marijuana is now legal there. All of those college students sitting there vaping marijuana.

Kim Smith stated the following:

- You know the Biden administration is trying to push through medical marijuana.

Motion to accept the Evaluation of Need for New or Amended Local Rule, discussing vape shop location rule with the City Planner of Whiteville, North Carolina, was made by Patty Hobbs, seconded by Dr. Nicole Martin, and carried by the board.

D. Strategic Plan 2020-2024 Update and Strategic Plan 2025-2029 *(Benchmark 15, Activity 15.1)*

- I requested from the state an extension on our Community Health Assessment (CHA). Kathy Dale, who is in charge of the CHA granted us an extension until June 1st. She also sent us over more secondary data. We had a strategic planning session, which was led by UNCW.
- The data does not show us anything different or new. We did put where one of the issues was hiring qualified personnel. So our top three targets are:
 - Workforce
 - Chronic Disease
 - Substance Abuse / Opioids
- We held the session two days in March, from 9am to 1pm. Leah and Tiffany did a wonderful job. I was hoping to have something tonight to present to you all, but Leah had her baby two weeks earlier than expected.
- To clear up the 2020 to 2024 strategic plan, our main goal was COVID. It was to make sure our citizens understood COVID

and trying to get everyone vaccinated against it. I personally think we have done an excellent job with that; and we are continuously working on that still.

- Our second goal was Teenage Pregnancy Prevention. With the boards help we were able to continue that program in the school system. Dr. Meadows has always been a big help to us with this program.
- Goal number three was substance use / opioids. At first, we did not have a lot of money to put in to this. At the beginning of 2023, the county received the Opioid Settlement Funds. Nicole Hopkins is still our resource individual. If you ask an addiction specialist, they will tell you that the weather is nice, so no one is burning up or freezing; meaning we have not received that many phone calls for placement, here lately. We are still working with the Healing Place in Wilmington. Every now and then, she (Nicole) will not have someone on the other end, at the Healing Place, that is as enthusiastic as she is, to get an individual help. She has a nice resource list she has put together. We now have an agreement with someone in the county, who will now transport individuals to wherever she (Nicole) can get them in at. Their has been one to go up to Greenville, another to Charlotte and I think one more to Raleigh.
- The last goal was Dental services. Dr. BB (Breanna Benbow) and her crew have done an excellent job getting prepared to go out into the schools. They have actually been doing procedures on the bus (Tooth mobile). As compared to a couple of years ago, where we just did cleanings and x-rays on there.
- The middle of June will be her third year, and she has expressed an interest to return to school. We have already placed ads out. I hope that something will turn up from that.
- I hope that next time we meet, I will have a strategic plan that you all will be able to vote on.

E. EPA Announcements on "Forever Chemicals" (*Benchmark 37, Activity 37.6*)

- Back around mid-April, the EPA (Environmental Protection Agency) designated PFOA (perfluorooctanoic acid) and PFAS (polyfluoroalkyl substances) as forever chemicals. Someone with the North Carolina Environmental Health division told me that the Federal EPA is behind on this. They did designate it at four parts per trillion, which North Carolina had already done so.
- Last report we received, the wall is working well down at Chemours, and everything is doing better. I have an employee who lives in Raeford, and she will have to take off work, one

	day next week, due to them coming to install a water filtration system in her home. Her water has tested positive for GenX. She has had to go through a lot to get the filtration system in her home. I hope that the wall will continue to do what it is created to do.
Board Comments	

Next Meeting Date**June 26, 2024 at 6:00 pm****Meeting Adjourned**

Respectfully submitted: Kimberly R Smith Secretary 062624

Signature Date