

Wilkes County Board of Health Meeting Minutes

February 8th, 2021

The Wilkes County Board of Health held a regular business meeting Monday, February 8th, 2021, at 5:35 p.m. through a Web Ex conference platform due to COVID-19. Board of Health members in attendance were:

Ms. Susan Bachmeier (Web Ex)
Ms. Deborah Britton (Web Ex)
Ms. Teana Compeau (Web Ex)
Mr. Keith Elmore (Web Ex)
Dr. Fesperman (Web Ex)
Dr. Keaton Mash (Web Ex)
Dr. Gary Nash (Web Ex)
Mr. Carl Page (Web Ex)
Ms. Marcia Reynolds (Web Ex)
Ms. Adina Watkins (Web Ex)
Dr. Sarah Miller-Wyatt (Web Ex)

Ms. Rachel Willard, Ms. April Edwards, Ms. Nancy Moretz, Mr. Chad Shore (Conference), & Ms. Debbie Nicholson were also in attendance. Prior to the February meeting, packets containing the materials to be discussed were mailed to each Wilkes County Board of Health member for review and sent via email.

**Mr. Keith Elmore & Ms. Sarah Miller-Wyatt were sworn in by Ms. April Edwards to be members of the Board of Health.

Meeting Called to Order: Ms. Susan Bachmeier, Board Chair, called the meeting to order at 5:35 p.m.

Adoption of Agenda: Ms. Deborah Britton made the motion to adopt the amended **Agenda** for the Board of Health meeting for February 8th, 2021; the motion was seconded by Dr. Joe Fesperman; unanimously approved.

Approval of Minutes for December 14th, 2020 Meeting: Ms. Teana Compeau made the motion to approve the **Minutes** from December 14th, 2020; the motion was seconded by Ms. Marcia Reynolds and unanimously approved.

Old Business: None

Administrative Reports:

Quality Improvement Annual Report: Ms. Debbie Nicholson

Reportable Communicable Diseases for Wilkes County: 318 cases reported in 2020 (244 STDs, 74 other), 49 cases foodborne illness and 6 cases of Vector borne illness reported. **Primary Categories of Communicable Diseases:** 16% Foodborne, 3% Vaccine Preventable, 2% Vector borne, & 79% STD's. **Reportable STDs for Wilkes County:** The number reported STDs was 244 for 2020 (2019-237). The cases of gonorrhea was 52 (2019-44). **Foodborne Illness:** 49 cases of foodborne illness (2019-40), E Coli: 3 cases (2019-3) Campylobacter: 24 cases (2019-22) Salmonella: 20 (2019-11). Significant rise in the number of foodborne illness, with 20 Salmonella cases reported, up from 11 in 2019 while the cases of Campylobacter remains consistent.

Vaccine Preventable Disease: 11 cases of VPD, primarily Hepatitis A, Clinic staff continue to be vigilant in identifying individuals who are at risk for being exposed to Hepatitis A, B, and C. Vaccines are then administered to those individuals who have not received, or finished the Hepatitis vaccine series for Hepatitis A and Hepatitis B. Hepatitis C: education on control measures, assist with self-referrals for treatment. **SARS-CoV-2 (COVID-19): Wilkes County:** Positive Cases: 3,939, Tested: 3,780, Vaccine: Administered 528 first doses in December with the second dose to follow 28 days later. **Rabies Update:** 6 investigations of potential humans exposed to suspect or confirmed rabid animals, 2 exposures significant enough to warrant post-exposure prophylaxis, Public education and outreach – animals vaccinated and avoidance of animals high-risk for rabies.

*** Deborah Britton – Is the data on STD's & also on Foodborne Illness are broken down by age groups? I feel this would be beneficial information to have; do you track this information? Ms. Rachel Willard responded that "We do, in regards to STD's, what we see is from our 25-39 year olds age group is where our high STD groups are at this year. I do not currently have the breakdown of numbers for Foodborne Illnesses, but we will get those numbers and send those out from Angela. What we do, specifically, in regards to STD's, we would look at different age groups and try to target education and outreach, because those different age groups are population. In 2018, we went back to all the different practices and distributed information on STD's and our services and then we tried (16-24 age group range) to do some targeted messaging around Family Planning and STD for that specific age range. However, with COVID, we have not been able to do as much outreach as we would like. (Ms. Deborah Britton stated to disregard the Foodborne Illness information).*

***Ms. Susan Bachmeier – The Hepatitis Vaccine; is the cost of that to the patient on the "sliding fee scale"? Ms. Rachel Willard stated "if they don't qualify for the state vaccine, then "yes", but most of the people who are getting the Hepatitis A Vaccine have been exposed or they meet the definition by the State, so they actually get that for free. We also added Environmental Health Specialists to get the Hepatitis A Vaccine to our Immunization Policy a year ago.*

***Dr. Joe Fesperman – Is the FQHC still working to get Hepatitis C treatment? Ms. Rachel Willard stated that it is; we have one Provider trained to be our Hepatitis C Coordinator and we did start that training prior to Ann Absher retiring, but some of that has gotten lost during COVID. Our Provider does continue to participate in the Webinars and move in that direction when available. When we are able to, we have looked at partnering with Alpha in Hickory because they have a Provider that could come here and provide some support to get that up and going. Dr. Fesperman informed the Board that the importance of the FQHC doing this is the treatment is very expensive and patients would be able to get that treatment free of charge.*

Customer Satisfaction (328 surveys): English: 260 surveys, New Patients: 16%, Returning Patients: 84%, Referred by a friend: 51.2%, Referred by another practice: 11.6%, our practice/services: 94.03%, The Quality of your visit: 93.93%, the care you received: 93.96%, Making your appointment today: 90.19%. **Spanish:** 68 surveys, New Patients: 16.2%, Returning Patients: 83.8%, Referred by a friend: 94.1%, Referred by another practice: 2.9%. Our practice/services: 100%, The Quality of your visit: 100%, the care you received: 98.53%, Making your appointment today: 97.06%. **Employee Satisfaction Team: Annual Survey in October 2019** - Identified improvement needed in: lack of feeling appreciated and communication, Implemented: Public Health Awards: added Positive Team Player in a Supervisory Role award with 1 recipient; all other awards have 2 recipients now, Shout Out Bulletin Boards: Place notes on board to recognize a job well done, encouragement, and/or prayer requests. **Program Monitoring: TB Annual Assessment** - Due to pandemic, not required to participate in annual

audit process / No problems found during the off site assessment. **Immunization Rate Assessment (2019):** 78% ((74% - 2018) children in HD immunized by 24 mos. 76% (79% in 2018) children in Wilkes County immunized by 24 mos. DTaP (4), HepB (3), Hib (3), MMR (1), Polio (3), Pneumo (4), and Varicella (1). 2020 Assessment in February 2021. **WIC Program Review: Strengths:** Outstanding job making WIC services available to individuals and families who experience potential barriers to participation: early appointments, late appointments, and walk-ins. Vendor files sent to the review team were organized, complete, and detailed beyond minimum requirements. The level and variety of outreach indicates thoughtfulness in planning where and how outreach occurs to maximize its impact on the population of Wilkes County. Areas for improvement in documentation identified, Corrective Action Plan: submitted, implemented, and approved by state. **Full Audits:** (2019-2020) Adult Health PE (90% to 87%), Adult Health Sick (86% to 83%), BCCCP (83% to 96%), Child Health PE (88% to 91%), Child Health Sick (93% to 89%), Family Planning (88% to 84%), MESH (97% to 92%), STD (86% to 77%), TB (94% to 51%), WIC (98% to 93%). We do think that the change in CD personnel and the turnover of Providers caused a negative effect on our numbers. **Environment Health Quality Assurance:** Data from Food and Lodging: State has implemented new QA program with each field agent being evaluated twice each year and 3 file reviews each year. On-site Waste Water (15), Well Permits reviewed (2), Peer review visits by supervisor, Issues are addressed with individual and at staff meetings. **Client Concerns:** Concerns: 5 Customer Service, Concerns were reviewed and followed up by supervisor. **Incident Report:** Incidents: 5 employee incidents. Each incident managed appropriately. **Laboratory Quality Assurance:** Lab Medical Director: provides monthly review, Areas reviewed: proficiency testing, quality control, maintenance, procedures/standing orders, and competency testing (annually). COLA Survey: Score 99%. **Patient Centered Medical Home:** Received recognition by the National Committee for Quality Assurance (NCQA) as a Patient Centered Medical Home again in 2020. Annual Reporting Date: November.

*** Ms. Susan Bachmeier – In regards to the “mislabeled” N95, are you having concerns with the quality or accessibility of the PPE? Ms. Debbie Nicholson stated that the box was mislabeled by the company, but we have not had any issues with quality or quantity of PPE. Ms. Rachel Willard stated that the main thing we are having difficulty with is getting “medium gloves” and good quality. We have our coordinators working on that, but that is our main challenge currently. Also, I have a certain number of patients associated with it or is that all the patients that come to you for Primary Care? Ms. Debbie Nicholson stated this would be patients that come for Primary Care. Ms. Susan Bachmeier – Do you know a ballpark roughly of how many patients that is? Ms. Rachel Willard stated that last year, it was 2,800, but in a normal year it’s around 4,200.*

Six Month Financial Review: Ms. Nancy Moretz – We are going to review the Mid-year Financial Report which is for July thru December, 2020. Our Total Revenue Fiscal Year which includes our General Revenue, Programs, & State Grants, Federal Grants, Permits & Fees is \$3,277,148 (57%). Our Total General Expenses YTD which includes General Salaries, Benefits, Operating Expenses, and Capital Improvements is \$801,481 (38%). Our Total Program Expenses, which includes Salaries and Benefits, Operating expenses, Federal Grant Salaries and Benefits, and Federal Grant Operating Expenses is \$2,804,992 (48%). Total Expenses YTD is \$3,606,473 (51%). Ms. Rachel Willard clarified for new board members that General Expenses (anything in our General Programs is all County supported and everything in Programs is thru State and Federal Government)

***Mr. Keith Elmore – I notice that the Actual Revenue and the Actual Expense and there’s about a \$400,000 difference; should those not balance? Ms. Nancy Moretz stated that the “Actual Total Revenue vs. Actual Total Expenses varies by about \$329,000 because our “Actual Expenses are what we actually spent for example, one month (December), but our Revenue is drawn down from our State Grants and Federal Grants as we spend it, so the*

Revenue can't be drawn down for some of the Expenses until the next month...so technically, Revenue for the State Programs & the Federal Grant is a month behind.

Six Month Financial Review: Dr. Joe Fesperman made the motion to adopt the **Six Month Financial Review**; the motion was seconded by Ms. Deborah Britton; unanimously approved.

****Ms. Rachel Willard** advised the Board that “to date from State & Federal levels”, we have received \$1,435,361 to combat COVID in Wilkes County just at the Health Department and when that is broken down at State and Federal Levels, from the State level, we have received \$604,534 & from the Federal Government, we have received \$830,827. We have been very fortunate to receive those funds, but one of the things that will have to be looked at and will have to go to the County Commissioners is moving some money into Capital Outlay because our elevator is completely broken now; we can't get parts any longer and replacing it will be approximately \$80,000. The elevator is also our only “ADA” compliant way to get from the top floor to the bottom floor, so this is a “high priority”. We are currently waiting on our two quotes to come in and figure out what we need for our “budget amendment”.

****Ms. Susan Bachmeier** questioned if we expect to receive any more Federal Funds in 2021? Ms. Rachel Willard stated that she definitely hoped so because for “Vaccine Support, Supplies, the Sharps Containers and the Medical Waste Expense” (everything has tripled in cost); additional funding would help to “offset” these expenses.

Departmental Update: Ms. Rachel Willard

Since December, January 16th, we did switch from Patagonia to CureMD, which is another Public Health EHR; it has gone fairly smoothly, from the “billing & registration” side, it has been fairly simple, easy, and straight forward, but the Clinical piece there's a little more clicking than the Providers have been used to, which has been a little hurdle, we had some pieces that didn't move over from Patagonia to CureMD, but that was a Patagonia issue (we are still working to make sure we have everything we need). One of the biggest issues is the way the medicines that patients are on came over, so Providers are having to go in when the patients come for the first time and basically go and prescribe every single prescription they were on, so a 15 minute visit is taking an hour; this has negatively affected our productivity numbers (we're at 6 patients a day, which is ½ of what we should be seeing per provider). MESH is back out at all of the schools; they went back out in January when schools started back, not a lot of use, but we feel that is due to COVID and if you're a “symptomatic” student, you are already “screened out”, so MESH is in an odd place. The schools really want us there, so we are just watching and trying to figure out that piece for now. Jodi Province and her team for the Mental Health piece are continuing to be there, we're continuing to do the follow ups. They are at the schools more than they had been in the past; we've been able to find some additional funds to help allow them work some additional hours to help the middle and high school students. WIC participation is at 122% for our rate and the goal is to be at 97%; luckily, we have exceeded that goal and we got additional funds to help our clients, which in return, only helps our county when they go to the store from the sales tax, so that is great news! Brandon Ward, Provider, has returned back to us, we still do have two positions vacant in Clinic; they are both for nurses (one an LPN). We are struggling to get people to come and work right now, but with the Pandemic, no one wants to be in the middle. We still have an opening for an “Environmental Health Specialist” for Food & Lodging; we are hoping to make an offer today, but no word on that yet. Environmental Health is still struggling, it is still about a 6 week turnaround time for “Well & Septic's”; for every one application that they put out, they're taking about 4 to 5 more in. Health Education is at a “stand still” for now due to COVID; DPP, they were able to finish that cohort; they started out with 20 people and finished with 10, Brenner FIT was completed in December, but we will not be doing Brenner Fit for the community anymore in 2021. The “Bike Rodeos” have been put on hold due COVID; no one felt

comfortable going into the schools or the schools having us, but we are hoping to be able to start back next school year.

COVID Update: Ms. Rachel Willard

Wilkes County has 5,671 total cases, we are reporting 92 deaths, and 15 hospitalizations, 392 active cases; our percent positive, if looking at our daily, and we are at 11% roughly. When we look at the past 2 weeks, our percent positive is 8.9%. We currently have three outbreaks in the county and three clusters; one of the county departments is in our outbreak and the other two are nursing or long-term care facilities. We had discussed Wilkes Health and Rehab in the past and they were doing well, but currently, they have 143 positive cases in their current outbreak, it is worse than the last time. We are working closely with them and DSHR, the people who oversee them and regulate them have been in to do inspection site visit. We worked really hard with them the last time, but something is happening that we can't pinpoint; Angie Rhodes & Lisa Burgess are continuing to work with them and we do have a Regional person who focuses just on long term care facilities to do this kind of infection control work and they are also working with them. Our clusters, one of them is in a school system and is basically finished, but what we saw was in a classroom and the spread did spread throughout teachers and students; it did stay in that same cohort so we were able to manage it, isolate it, and no one else got sick. Wilkes County has been able to administer 7,838 doses; our first dose breakdown is 6,155 "1st doses" or roughly 9% of our population and then with 2nd doses, we have done 1,683, which comes out to about 2.46% of the Wilkes County population. The Health Department specifically has done about 5,000 1st dose vaccines through the HD. Thursday was our quickest "throughput"; we did 800 1st dose vaccines and we averaged about 3 people per minute within a three hour time span. We are getting faster and are doing everything we can to keep people from waiting too long.

***Ms. Susan Bachmeier – Do we know what to expect as far as “retail pharmacies” and how that is going to work? Ms. Marcia Reynold (Pharmacist) stated that they are expecting to get vaccines in the stores in the next three weeks and we're anticipating doing 8 hours a day vaccinating in stores, doing one shot every 5 minutes. Dr. Joe Fesperman – What about the pharmacy involvement with the extended care facilities and vaccines there? Ms. Marcia Reynolds responded that she is not on that team, but she knows they have been going out twice a week to those facilities and giving shots; the shots that are left over, are being taken over to the school level for the employees. Ms. Rachel Willard also stated that they are also scheduled to go back out and do the 2nd doses next week to those individuals, so all of our facilities that enrolled in the Federal Program, will start to get their 2nd doses next week (2-22-21 thru 2-26-21). Dr. Joe Fesperman asked how that affects the outbreak at the rehab center mentioned earlier. Ms. Rachel Willard stated that she did not know if the rehab center was on the list and she would have to check and respond back to him. Board members wanted to commend the Health Department on their efforts and accomplishments during this pandemic. Ms. Marcia Reynolds also wanted to add that all information, in regards to vaccinations, would be on CVS.com. Ms. Susan Bachmeier asked Ms. Marcia Reynolds in regards to “Register”, does that mean the vaccine management system for the state or is that making an appointment or both? That will be making an appointment, then we will log everyone into the vaccine management program and get everyone registered. Ms. Susan Bachmeier asked both Ms. Marcia Reynolds and Ms. Rachel Willard the percentage of both long-term care residents who elect to be vaccinated? Ms. Rachel Willard stated she would need to refer back to an email because at one point it mentioned number of beds and number of doses, if the email does not have the information, she will reach out to the state and see if they can provide a number. Ms. Teana Compeau asked if the health department would still be using Rivers Edge to do the vaccinating. Ms. Rachel Willard stated for now, but we are looking at moving to Group 3, so we are going to have to see what is most conducive to that group and we know*

that we are going to have to start Saturday clinics. We are working with the schools and we are working with Tyson to have that figured out. Where that is going to become difficult is the “manpower” this is taking and how can we do multiple clinics in the community in different locations that aren’t large scale because even if we were to do a smaller clinic, at a minimum, we would need 12 people. Ms. Teana Compeau also asked if there is vaccinations left over do you have a way that someone could come at the end of the day after a clinic. Ms. Rachel Willard stated that we have a very, very, short list and we mostly use that for our evening clinic where we do 10 doses each evening Monday thru Thursday, so we usually don’t have any left over.

Committee Reports: None

New Business: Ms. Rachel Willard

Last month in December, we did talk about Bad Debt Write Off and Ms. Carl Page had requested that we bring an amount just so the Board would be aware and the number for July thru December was \$8,338.41 and usually, in a six month period we see \$6,000 so it’s not too much more than we have seen in the past. If it’s the Board’s pleasure, can we go ahead and waive Bad Debt Write Off and do it at our June, 2021, Meeting? The Board was in agreeance to delay the Bad Debt Write Off to give patients more time to pay on their accounts.

Public Concerns: None

Next Meeting Date: April 12th, 2021

Ms. Rachel Willard also stated to the Board how much the staff appreciates all the Board Members have done in delivering lunches and snacks; they have been overwhelmed; it has really been a huge moral boost for staff.

Adjournment: Dr. Joe Fesperman made the motion to adopt the **Adjournment**; the motion was seconded by Ms. Teana Compeau; unanimously approved.

The meeting was adjourned at 6:37 pm.

Minutes respectively submitted by,

April Edwards, Administrative Assistant
Secretary to Board of Health

Ms. Susan Bachmeier, Board Chair