

BENTON-FRANKLIN HEALTH DISTRICT BOARD OF HEALTH

MEETING MINUTES

July 26, 2017

IN ATTENDANCE

Benton		Commissioner Beaver	\boxtimes	Jason Zaccaria, BFHD Administrator & BOH Executive Secretary
	\boxtimes	Commissioner Delvin	\boxtimes	Dr. Amy Person, BFHD Health Officer
	\boxtimes	Commissioner Small		Lisa Wight, BFHD Sr. Human Resources Manager
Franklin	\boxtimes	Commissioner Koch	\boxtimes	Jeff Jones, BFHD Sr. Finance Manager
	\boxtimes	Commissioner Miller	\boxtimes	Rick Dawson, BFHD Sr. Surveillance and Investigation Manager
		Commissioner Peck	\boxtimes	Carla Prock, BFHD Sr. Healthy People and Communities Manager
			\boxtimes	Cody Lewis, BFHD Information Systems Manager
			\boxtimes	Janae Parent, Admin Analyst/Executive Assistant
			\boxtimes	Diane Medick, Administrative Assistant
			\boxtimes	Annie Goodwin, Nutrition Services Supervisor
			\boxtimes	Kirk Williamson, BFCHA Program Director
			\boxtimes	Carol Moser, GCACH Executive Director
			\boxtimes	Wes Luckey, GCACH Data Processor
				Vanessa McCollum, PTE Local 17 Union Rep
			\boxtimes	Isabell Lin, BFHCA Intern
			\boxtimes	Visitor – Dana Cannon, University of Wisconsin Student Nurse

CALL TO ORDER

Chairman Bob Koch called the meeting to order at 1:30 p.m.

APPROVAL OF MINUTES

- a) Commissioner Delvin moved to approve the April 19, 2017 minutes, Commissioner Miller seconded. The motion carried unanimously.
- b) Commissioner Delvin moved to approve the May 17, 2017 minutes, Commissioner Miller seconded. The motion carried unanimously.

APPROVAL OF SAFE BABIES/SAFE MOMS PETTY CASH FUND CONSOLIDATION

c) Jeff Jones explained to the board that the Safe Babies Safe Moms (SBSM) contract is now expired and that there has been a discretionary fund that was used for incidental purchases that is no longer necessary. He suggested to put the initial fund balance of \$2000 back into the general account that has \$1000 in it at this time.

Commissioner Delvin asked who controls the fund. J. Jones stated the Finance department are the custodians of the funds. Commissioner Small asked about earmarks. J. Jones stated this amount is free and clear of any encumbrances, and that the initial funds were from the District's general fund. Commissioner Small asked if the state had any attachments to this fund. J. Jones stated no; it was authorized through the state and BFHD has not raised the petty cash amount in 17 years. Facilitating the transfer will allow BFHD to have the funds needed on site and will minimize additional runs to the bank.

Commissioner Small moved to approve the consolidation of the SBSM petty cash, Commissioner Miller seconded. The motion carried unanimously.

APPROVAL OF VOUCHERS

d) Commissioner Small moved to approve payment vouchers numbers 27-2017 through 51-2017 in the amount of \$2,036,409.01, Commissioner Miller seconded.

Chairman Koch asked for clarification on the Lay Leader stipend. Carla Prock informed the board BFHD has people who do a few hours of work when needed and BFHD provides them a stipend for their services.

The motion carried unanimously.

DISCUSSION ITEMS FROM THE PUBLIC/STAFF

N/A

UNFINISHED BUSINESS

None to report

NEW BUSINESS:

1. Medical & Environmental Health Updates - Dr. Person

- a) Dr. Person updated the board on the investigation on the cluster of Legionella at Gold's Gym in Kennewick. There are three confirmed cases in patrons of the establishment. The facility has closed the pool/spa area at our request.
- b) BFHD is working with the State Department of Health and CDC to ensure the facility goes through the proper decontamination procedures. They are taking samples from the facility, and have notified the providers that Legionella is here.

- c) The media is aware of the situation and BFHD is keeping the public and its employees up-to-date.
- d) Commissioner Small asked how the victims are doing. Dr. Person stated there is a 10% chance of this being fatal in these types of cases. She also stated all three of these cases are recovering.
- e) Dr. Person also stated those at risk include: people over the age of 50; have chronic lung diseases; immunosuppressive disease; or smokers.

2) Women, Infants and Children (WIC)/Injury Prevention Program Update – Annie Goodwin

- a) A. Goodwin stated she will talk about the Outreach Program as the WIC/Injury Prevention Program update. The BFHD has a variety of ways in which the public can be kept informed about BFHD services and /or other updates. By way of introduction, Annie asked the Commissioners how they get their news. All had various ways they get information including the internet, newspaper online, e-mail etc.
- b) BFHD has a variety of methods for communication, including the website at www.bfhd.wa.gov; a Facebook page, www.bfhd.wa.gov; a Facebook page, www.facebook.com/Benton-Franklin-Health-District; and Twitter at Tweets by @BFHD. All of these methods allow the public to reach BFHD and the Health District in turn helps to address their needs and/or requests.
- c) BFHD adheres to the archiving guidance for these various methods of communication, and of public records requirements. Ms. Goodwin stated the District is now working on a Pinterest page and a YouTube site.
- d) Commissioners were invited to like and follow BFHD on the various social media sites.

2. Benton-Franklin Community Health Alliance (BFCHA) Update – Kirk Williamson

- a) Mr. Williamson is the Program Manager for BFCHA having taken over when Carol Moser became the Executive Director for Greater Columbia Accountable Communities of Health (GCACH). He introduced Isabell Lin, the intern who is studying Public Health at Western Washington University. She will be working with Mr. Williamson and BFCHA through the Summer.
- b) BFCHA started out as a task force at the Cancer Center in the early 1990's as a framework for the hospitals to work together. That part of the program worked and it became too big for just the Cancer Center so they expanded to become an advocate for community health and providing individuals with information about resources for good health.
- c) In 2012, there were two primary areas of focus: Access to Care and Obesity/Diabetes. Then in 2016 Mental Health was added and then it was expanded to become Mental/Behavioral Health.
- d) Mr. Williamson provided some updates that have been made to the revised Community Health Improvement Plan (CHIP). He pointed out that 10th graders have a 31% obesity rate, which is close to adults at 33 percent. BFCHA are now trying to get these groups to participate in good food institutions.
- e) The Master Gardeners helped with the establishment of food gardens for fresh healthy foods. They are calling it the 5-2-1-0 wellness campaigns in schools, which stands for 5 servings of fruit/vegetables; less than 2 hours of screen time; 1 hour of physical activity;

- and 0 sugary drinks per day. K. Williamson thanked the Commissioners for their efforts with Candy Mountain for having another avenue for free outdoor physical activities.
- f) Their website is http://www.bfcha.org/ and they also have brochures with information and advocate feedback. The brochures are currently available in English and Spanish, but will be adding other languages in the future as needed.

Commissioner Delvin made a comment that Benton County is trying to figure where to put people with mental/behavioral health issues. Right now they put them in jail which is not the best choice. But it was the only way to get them into a safe location. He also stated Benton County could help to grow the BFCHA grow in the future.

Mr. Williamson told them he would be in contact with them for further follow up.

e) Greater Columbia Accountable Community of Health (GCACH) – Carol Moser, Executive Director and Wes Lucky, Data Analyst

- a) C. Moser presented the BOH with a report outlining what this group is doing and the directions they are taking. Ms. Moser stated that they are now a 501(c)(3), Nonprofit Certified.
- b) They have a timeline for the Medicaid Demonstration Projects. Some of the components include: in 2017 they would develop a plan with local partners, then met with people across our regional area; then in 2018 would have Project Implementation; and in 2019 would be reporting baseline quality outcome and population-based measures; and finally 2020-2021 the results to show the improvements over baseline quality outcomes and reducing hospital use.
- c) The next step is getting Project and Participating Provider contracts. The following is what has been done in the developing stage: reviewing Community needs; getting a list of potential projects; narrowing the list against the principles; develop Project Team Reports (PTR); request qualifications basically a letter of interest (LOI); review and score; identify Broad Stakeholders; establish a Project Advisory Committee (PAC) and a Technical Advisory Committee (TAC).
- d) To further get to the finish they will continue with the following: develop Project Selection Criteria; develop RFQ/LOI or scoring criteria; Dispute Resolution/Appeals process; RFQ/LOI review and scoring; identify participating providers; then notification and contracting process.
- e) W. Luckey, the Data Analyst for the GCACH provided the data that goes with the program. Benton and Franklin counties have some of the highest ER/ED visits this is the most expensive type of care to provide. Franklin County has a higher poverty rate than any other county in the state, and also have a larger Latino/Hispanic community.
- f) Benton and Franklin counties are short on Clinical Care because they are short on Primary Care Providers.
- g) C. Moser stated they are developing the Project Plans and working with the eight Project Teams. They hope to have a matrix outcome with strategies by November 16, 2017 for the Project Plan Application. There is a total of \$119 million in provider incentives to be earned. They are putting together what they need to get all of the \$119 million.

- a) Jason Zaccaria had Janae Parent give to each Commission a copy of the final 2016 BFHD Annual Report. He thanked the Commissioners that previewed the report and provided feedback. The 2016 report was centered on achieving full accreditation from the Public Health Accreditation Board. Mr. Zaccaria provided a high level overview of the Annual Report. The report will be widely distributed either by electronic mail, the BFHD website or by traditional mail after the BOH meeting concludes today.
- b) Jason Zaccaria stated that BFHD's collective bargaining agreement with the Washington State Nurse Association (WSNA) ends this calendar year per Article 27. The District expects to receive notice to engage in collective bargaining with them soon. BFHD has started the process of reviewing the current collective bargaining agreement language, analyzing the anticipated cost impacts for benefits for the next cycle, and preparing a management proposal.
- c) Jason Zaccaria stated that a number of managers and staff went to the recent Washington State Association of Local Public Health Officials (WSALPHO) meeting in Chelan. Jamie Bodden was introduced as the new WSALPHO Managing Director who took Brad Bank's position when he moved on. Good dialogue took place throughout the meeting and a some of the key highlights included:

From the Prevention side of the house:

- An educational presentation related to Syringe Exchange and Naloxone distribution programs and how they are operated and funded in the LHJs that house them.
- The Opioid Panel presentation from Sea-King, DOH and the HCA about the various
 activities underway related to prevention, treatment, access expansion, safe
 consumption and pending legislation related to opioids and other drugs. Drug
 overdose is now the LEADING cause of death among Americans under 50.

From the Environmental health side of the house:

- Discussion on health equity and feeding the homeless, and the potential impacts of volunteer groups attempting to provide meals with less focus on food safety. Possible solutions discussed may include more institutional kitchens for food preparation, churches and temporary permits to evaluate and ensure basic food safety.
- There was also a discussion of drinking water contamination from unregulated contaminants from compounds that do not currently have maximum contaminant levels, which makes detection hard to evaluate in water systems and other exposure locations. While our ability to detect contaminants improves, the group feels these issues will increase in the future.

From the Public Health Administrators:

- Significant discussion around Foundational Public Health Services (FPHS), which has been covered here with the BOH in the past. Also, significant discussion centered around the concept of cross-jurisdictional shared services.
- Eric Johnson from WSAC discussed the financial constraints that many of the WA State Counties are experiencing due to limits on property taxes relative to inflation and overall growth demands.
- d) J. Jones informed them the Auditors came on site 7/10/2017 looking at 2016 financial statements; the federal single audit including the Women Infant and Children program, and Emergency Preparedness Programs; a 2015-2016 accountability audit, credit card usage; and overall grants accountability. The audit should be finished by 8/11/2017. The total cost of the audit will be about \$25K. J. Zaccaria extended appreciation to the Commissioners who came to the Entrance Conference at the beginning of the audit.

EXECUTIVE SESSION						
Not needed.						
DATE OF NEXT MEETING						
Date of next meeting will be August 16, 2017.						
ADJOURNMENT						
Chairman Bob Koch adjourned the meeting at 2:37 p.m.						
Signature on file	Signature on file					
Signature on file Robert Koch	Signature on file Jason Zaccaria					