

Forsyth County Board of Health



- Dr. Linda L. Petrou, PhD, Chair
- Dr. James K. Doub, OD, Vice Chair
- Ms. Judy Briggs
- Mr. John Davenport, Jr., PE
- Dr. Calvert B. Jeffers, Jr., DVM
- Dr. Charles F. Massler, DDS, M.Ed.
- Dr. Willard L. McCloud, Jr., MD
- Ms. Jane Bradner Mosko, RN, CRNA
- Mr. J. Phil Seats, R.Ph., MBA
- Dr. P. Lee Salisbury, III, DDS
- Dr. Ricky Sides, DC
- Ms. Gloria D. Whisenhunt, County Commissioner

BOARD OF HEALTH MINUTES October 3, 2012

MEMBERS PRESENT

Dr. Linda Petrou, Chair
Dr. Calvert Jeffers
Dr. Charles Massler
Dr. Willard McCloud
Ms. Jane Bradner Mosko
Dr. Ricky Sides

MEMBERS ABSENT

Dr. James Doub
Ms. Judy Briggs
Mr. John Davenport
Mr. J. Phil Seats
Ms. Gloria Whisenhunt

STAFF PRESENT

Mr. Marlon Hunter
Ms. Cynthia Jeffries
Ms. Ayo Ademoyero
Ms. Sandra Clodfelter
Ms. Lynne Mitchell
Ms. Quintana Stewart
Mr. Bob Whitwam
Ms. Lorrie Christie
Mr. Charles Cahill
Ms. Caren Jenkins
Ms. Janet Kiger
Ms. Linda Means
Ms. Whitney Rouse
Ms. Carrie Worsley

Call to Order:

On Wednesday, October 3, 2012, the Forsyth County Board of Health held its regularly scheduled monthly meeting in the Board Room at the Forsyth County Department of Public Health (FCDPH). Dr. Linda Petrou, called the meeting to order at 5:36 p.m. and welcomed Board members and guests.

Consideration of Minutes:

The minutes of the September 5, 2012 Board of Health Meeting were reviewed by the Board. A request for a motion to approve the minutes was made by Dr. Petrou. A motion was made by Dr. Willard McCloud and seconded by the rest of the Board. The minutes were approved.

Public Comment Section:

Board Members and staff introduced themselves.

Before getting started, Dr. Petrou urged Board members who had not had their flu shots to please do so.

Also, Dr. Petrou mentioned she had sent out a couple of emails this week – one to the Board, one to expanded staff at the department and one to community members, asking them to do an evaluation for Mr. Marlon Hunter, Health Director. She wanted to make it clear to the staff that the evaluation was set up in a way that she has no idea who is saying what and in addition, staff did not have to put their names down. The last she looked there was about nine staff who had filled out the evaluation. Dr. Petrou wanted to encourage those who received the evaluation to please complete it and be as frank as you want because she is the only one who will see it.

Health Director's Comments

In his comments, Mr. Hunter said he wanted to touch on six points. They were:

1) Nurse-Family Partnership (NFP) - he travelled to Denver, Colorado and spent time at the NFP National Headquarters. He went a few days early to experience Denver. NFP is very reputable and they get many accolades around the U.S. and from federal government. The University of Colorado is heavily involved with NFP. He said after having a chance to go and get some knowledge about NFP, he is glad to have NFP come to Winston-Salem and having the program here. He and Ms. Sandra Clodfelter have been working really hard and Ms. Ann Smith at Forsyth Medical Center will roll out NFP on November 2nd at 11:30 am. He told the Board they would all be sent invitations. Mr. Hunter said he had made contact with the State Health Director, Dr. Gerald's office, asking her to be the keynote speaker. He had not yet heard back from her office.

2) Secondly, we finally had an opportunity last Monday to roll out the Community Health Assessment for 2011. It was held at the Forsyth Medical Center Conference Center. It was very well attended by 32 agencies and had around 66 attendees (copy of list on file in Administration Binder). They were very interested in using the data to see how we could move forward here in our community.

3) Mr. Hunter announced that we are having our flu clinic this week. Ms. Clodfelter added that they had seen 1,875 adults and 275 kids as of 5:00 pm today.

4) As part of his presentation, Mr. Hunter will ask Ms. Cynthia Jeffries, Mr. Bob Whitwam and Ms. Lynne Mitchell to each give a brief two minute presentation on proposals they have for the Board's approval. Ms. Jeffries will talk about fee changes we will need to make.

5) Ms. Mitchell will give a brief review of some adjustments we have made to our budget internally due to Family Planning cuts we received from the State.

If you recall, last month, in the division accomplishments that we made, as part of my one year anniversary, one of those accomplishments was the fact that we brought in an additional \$2 million dollars in Medicaid revenue. We wanted to request some of these funds for any special projects that we might have, so the County Manager asked us to bring our requests to the Board of Health for approval and then send a request to him so he could get the information before the Board of Commissioners.

6) Mr. Whitwam has a presentation about West Nile Virus – how we can use the additional funds to address West Nile Virus cases and issues around the country. We want to buy more slides and equipment to sustain our program that will minimize any possible issue.

Mr. Whitwam addressed the Board about West Nile Virus. He mentioned that in response to a recommendation made by the Centers for Disease Control (CDC) to conduct enhanced surveillance for West Nile Virus, the Environmental Health Division was proposing some adjustments to the Mosquito Control Program. It was noted that these enhancements would be effective as soon as they have additional funding to implement them. He spoke in detail about his two-phase approach to enhancing the program (copy of full proposal on file in Administration Binder).

Ms. Mitchell spoke about the funding reduction in the Title X Family Planning fund. She said one of the department's goals was not to eliminate a single program. After meeting with Mr. Hunter, Ms. Clodfelter and others, of the \$103,000 that was cut from the budget, the department came up with almost \$85,000, however, this still left a shortfall of \$18,025. The department is asking the County to absorb the \$18,025. Dr. Ricky Sides moved to approve the proposal and Dr. Charles Massler seconded. All the Board members were in favor of approving Ms. Mitchell's proposal (copy of full proposal on file in Administration Binder).

Ms. Jeffries sought the Board's approval on a fee charge for the Nexplanon, a birth control implant for women who would like a long-lasting option. The proposed fee is \$425.00. The cost we buy the device at is \$390.00 plus shipping and handling and plus \$35.00 we add on, brings the total cost for the device to \$425.00. The Medicaid rate is \$698.99. Board members had questions regarding sliding fee scales and asked Ms. Jeffries if she could bring the clinic's sliding fee scale to the next meeting. After much discussion, Dr. Massler made a motion to approve the \$698.99 rate so the program could get going and Ms. Jane Bradner Mosko seconded. All the Board members were in favor of approving Ms. Jeffries' proposal. Dr. Petrou suggested they revisit this issue in January after we see how many people are requesting/using the device, how many Medicaid people are getting it, how many people are getting the device at \$0. Mr. Hunter added these were good questions because when we have to go to the Board of Commissioners they will have very similar questions, so we will be ready.

New Business:

Theme – Communicable Disease Control and Prevention

Communicable Disease Data, Outbreak: Definition, Roles & Responsibilities – Ms. Ayo Ademoyero talked about what happens when there is an outbreak and how multiple divisions play a role. Ms. Ademoyero gave a snapshot of what diseases are to be reported to the Health Department within 24 hours and diseases that should be reported within 7 days of identifying. She said there are many laws around reporting communicable diseases. Physicians are required by law to report cases of communicable disease to their local health department (copy of handouts on file in the Administration Binder).

Pertussis Case Outbreak Investigation – Ms. Caren Jenkins spoke to the Board about pertussis, also known as whooping cough. She used a doll to give an example of what a child with pertussis sounds like. Ms. Jenkins said pertussis is caused by upper respiratory bacteria. In the 1920's there were a lot of cases of pertussis – in the 1940's a vaccine was developed and by the 1980's they saw very few cases of pertussis. Ms. Jenkins shared a door sign from 1938 that would be put on people's doors if they had pertussis. Children going into the 6th grade have to get a TDap shot, which is 82-85% effective. There is a misconception that as long as you have had your TDap, there is no way you can get pertussis but Ms. Jenkins said that is not exactly true (you do not have 100% protection). So far this year they have had 16 cases of pertussis, 5 of those cases in public schools here. The duration of the cough can last for several months (used to be called the 100 day cough). The vaccine is available to the community here at the health department. They take all investigations very seriously. Dr. Massler asked if physicians were required to report to the Health Department and Ms. Jenkins and Ms. Ademoyero responded yes, they are. With pertussis, the cough normally gets worse over time.

Norovirus Case Outbreak Investigation – Mr. Whitwam and Ms. Janet Kiger reported on Norovirus. Noro normally comes in as some type of report from a facility where there is a group of people gathering for a few days and you have a sudden onset of vomiting and diarrhea. They get called in to try to find out where it came from. Normally someone from Environmental Health will make the first visit out to see if there is something that might have caused the outbreak. Anyone affected should be isolated anywhere from 24 to 72 hours. Ms. Kiger spoke about a case that the Nursing Division along with Environmental Health Division had to investigate at a local cub scouts camp. The case involved 124 scouts and staff. She said 31 out of the 124 were identified as having gastrointestinal illness and an additional 38 secondary cases were identified among family and friends for a total of 69 cases associated with the outbreak.

Mr. Whitwam added that Nursing and Environmental Health work collaboratively whenever there is an outbreak. Environmental Health did a thorough investigation of the facility. They checked things such as water supply, sewage, hand washing, food supply and the activities. By the end of the day, they could not identify any risk factors that could have transmitted the illness. They recommended control mechanisms and recommended symptomatic campers and staff not go back until 8 hours after having no symptoms and have no contact with food. There were no new cases identified after July 17th (copy of handout on file in Administration Binder).

Rabies Case Investigation – Ms. Linda Means and Mr. Charles Cahill reported on rabies and how the Nursing Division and Environmental Health Division work closely together when they have rabies cases. In most instances when there is a report of rabies, both a nurse and an environmental health specialist will go to the facility. Ms. Means stated that in 2011-2012, 994 lab reports came to her from Animal Control – she had to go through them all to see if Nursing needed to be involved – 313 of the reports had to have a lot of work done on them. When there is intervention, they have to make telephone calls and write letters to try to get people to comply with procedures or just to let them know how dangerous it is. Ms. Means reported there were 184 rabies specimens sent for testing – out of those 15 tested positive for rabies (6 skunks, 4 foxes, 3 raccoons and 2 bats). Ms. Means and Mr. Cahill investigated a case involving 11 bats in one of the buildings of a business. Of the 11 bats found, 8 were tested for rabies and 2 of the bats came back positive. Ms. Means said when people have to be treated for rabies, it is very expensive. Dr. Jeffers asked if insurance pays and she responded even if someone's insurance paid some of it, it would still be expensive.

Rabies Quarantine, Confinement & Clinics – Mr. Cahill stressed how important it is to have proper investigations done. If it is a domesticated animal bites someone, they check to see if the animal is current on its shots and whether or not it needs to be quarantined. Mr. Cahill talked about the investigation at the business Ms. Means spoke about. They did a full investigation and found out how the bats were getting into the facility. After some measures were taken, the facility has had no more problems with bats. Mr. Cahill mentioned that one of good things that came out of the incident was that they need proper reporting and they need more information. The State is now working on a policy to say here is what needs to happen when they have any more bats or any other wildlife in a facility.

Adjourn:

A request for a motion to adjourn was made by Dr. Petrou. A motion was made by Dr. Calvert Jeffers and seconded by Dr. Charles Massler. The meeting adjourned at 7:20 pm.

Marlon B. Hunter
Secretary to the Board
MBH/lgc