

Hancock Public Health Board of Health

Regular Meeting Minutes

July 21st, 2023, 7:30 a.m.



BOARD MEMBER ATTENDANCE:

- X Brian Edler, Board President
- X William Alge, Esq.
- X Karen Jones, MSN, RN
- X Michael Lindamood, M.D.
- X Nancy Moody-Russo, RN, JD
- X Barbara J. Pasztor, MSN, RN
- X Robin Spoors
- X Karim Baroudi, MPH, Health Commissioner
- X William Kose, M.D., Medical Director

STAFF:

- X Shannon Chamberlin, Nursing Director
- X Alexa Heacock, Help Me Grow (HMG) Director
- X Chad Masters, Health P&P Director
- X Cheryl Miller, PR/Marketing Coordinator
- X Craig Niese, IT/Data Manager
- X Laura Reinhart, Mobile Health Clinic (MHC) Coordinator
- X Lindsay Summit, Environmental Health (EH) Director

1.0 CONVENTION

1.1 Call to Order

President Edler called the Regular Board of Health meeting to order at 7:30 a.m.

1.2 Introduction of Public, Guests, and Staff

No special guests were present at the 7/21/23 BOH meeting.

2.0 BOARD MEETING CONSENT AGENDA

- 2.1 Approval of 7/21/23 Agenda Items
- 2.2 Approval of 6/16/23 Board Meeting Minutes
- 2.3 Approval of June 2023 Bill Schedule
- 2.4 Staff Reports
 - 2.4.1 Mobile Health Clinic (MHC) Services Laura Reinhart, CNP, Coordinator/Provider
 - 2.4.2 Health Planning & Promotion Chad Masters, MPH, Director
 - 2.4.3 Community Health Services Shannon Chamberlin, RN, Nursing Director
 - 2.4.4 Help Me Grow (HMG) Home Visiting Program Alexa Heacock, RN, Program Manager
 - 2.4.5 Environmental Health (EH) Services Lindsay Summit, MPH, EH Director
 - 2.4.6 IT/Data Management Services Craig Niese, BS, Manager
 - **2.4.7** Health Commissioner's Report Karim Baroudi, MPH, HC

Regarding the Dexcom Study, Mr. Alge requested clarification regarding G6 and G7 glucose monitors used in the Dexcom study. Ms. Reinhart explained the older G6 monitor device involves a transmitter and sensor as separate units, whereas the newer device (G7) combines sensor and transmitter. The G7 device is intended for increased ease of use for the customer in general, easier to apply, and smaller in size. Ms. Reinhart stated the G7 glucose monitor device is presenting customers with some unexpected technological difficulties, thus there is a

current break in enrollment of new clients into the Dexcom study until these technological issues are resolved. President Edler asked if anyone had heard of new glucose monitor technology in the form of a wristwatch, no needles involved. Ms. Reinhart stated, although she has heard of this newer technology, she knows no other detailed information about its use at this time.

Regarding the SafeWorks Program, President Edler reported he had heard about a decrease in overdose deaths in Hancock County as reported from the Emergency Dept. in Findlay; he asked if Narcan distribution in Findlay might be having a positive impact on overdose deaths. Mr. Masters opined there appears to be a significant correlation between decreased overdose deaths by 25% in one year and increased Narcan education/distribution in Hancock Co, and there is a speculated correlation between Narcan distribution and a recent decrease in hepatitis C cases, as well.

Regarding the new harm reduction program to be located in downtown Findlay, Mr. Alge asked how the new downtown Narcan distribution program may provide even further benefit to the community; Mr. Masters opined that the downtown program is expected to attract a larger number of customers due to being closer to customers' living situations and that the program will be located in a less threatening/more relaxed environment (nongovernment building). President Edler stated there should be more publicity for this new program location via local news, education, regarding information about program access and communication of long-term results of the program. Mr. Masters stated the City is still reluctant about seemingly nonconventional harm reduction techniques being used and there are still questions about why HPH continues to give out safe-use supplies. Mr. Masters stated more publicity would be beneficial, however, open conversations need to continue with folks who may not understand the end purpose of the program.

Regarding harm reduction in general, Dr. Kose stated the most common harm reduction counterargument seems to center around "enabling" – that harm reduction programs enable increased use of drugs, thereby increasing problems related to addiction. In response to the "enabling counterargument," Dr. Kose retorted that if people who have addiction are not alive there is no way to have a safe or healthy impact on their lives. Dr. Kose stated these difficult arguments and conversations about harm reduction programs will continue; he verbalized support of educating the public through news articles, however, stated we all would need to tread carefully due to this issue being related to such extreme opinions/emotions.

Discussion ensued between many Board and staff members regarding mental health issues among children/adolescents, specifically related to educating children and families about drug use/addiction. It was agreed among all speakers that more consistent research/data is needed to determine exact variables and most helpful education/treatment methods.

Regarding the CMH Program, Ms. Chamberlin added to her report that the first CMH insurance claim has successfully gone through the system in a complete cycle, thus more detailed CMH reports for the Board will be forthcoming.

Regarding IT and website renovation, President Edler stated he feels there is a significant need for more clearly identified areas on any health department website for clients to locate all the different permit applications and application instructions. Commissioner Baroudi concurred, adding that the end goal for the HPH website renovation is to have as much information provided online as possible for customers needing to fill out permits. Mr. Baroudi reported that the website changes will be shared with Board members as the project continues and asked Board members to offer ongoing feedback.

Regarding House Budget Bill 33 (HB33), Health Commissioner's report, Mr. Alge requested clarification. Commissioner Baroudi explained that within HB33, Governor DeWine successfully vetoed tobacco-related provisions that were aimed at preventing localities from creating their own ordinances, essentially vetoing the State taking away local control related to banning tobacco use/vaping. Included within HB33, Governor DeWine had proposed that \$20 million dollars of funding be earmarked for local public health departments, which unfortunately did not pass.

Commissioner Baroudi welcomed Board members to inquire or comment on the Meeting Consent Agenda items, as above. No further vocalizations from the Board.

President Edler requested motion to approve Section 2.0, including all Items and Subitems, as written in the pre-prepared Board reports provided earlier in the week to the Hancock County Board of Health members and as detailed above. <u>Ms. Pasztor moved to approve the consent agenda items as described in Section 2.0.</u> Seconded by Ms. Moody-Russo. <u>Motion carried 7-0.</u>

3.0 BOARD ACTIONS/REGULATIONS/VARIANCES/PUBLIC PARTICIPATION

- 3.1 Board of Health to APPROVE AND RECOGNIZE REVENUE for Fiscal Year ending 12/31/23:
 - 3.1.1 Beyond the Book for HMG in the amount of \$4,620.00
 - 3.1.2 Community Health Worker funding in the amount of \$87,598.00
 - 3.1.3 Ohio Children's Trust Fund funding in the amount of \$25,000.00
 - **3.1.4** PHEP '24 funding in the amount of \$38,718.35.
 - 3.1.5 Get Vaccinated Ohio '24 funding in the amount of \$20,519.50.
 - **3.1.6** Work Force Development in the amount of \$80,890.49

Mr. Alge asked why Subitem 3.1.6 did not appear in the list of Subitems under Item 3.2. Commissioner Baroudi summarized the two processes that are completed with the Hancock Co. Auditor's office relative to revenue: 1) Recognition of Funds — involving the Board of Health acknowledging that funds were applied for and will be received for use; 2) Appropriation of Funds — involving allocating how the revenue will be distributed/used. Mr. Baroudi and Ms. Summit explained that Subitem 3.1.6 (Work Force Development in the amount of \$80,890.49) is not listed under Item 3.2 specifically because the allocation of the funds for Subitem 3.1.6 has not yet been finalized. Mr. Baroudi stated Subitem 3.1.6 will more than likely be listed in next month's budget.

President Edler requested motion to approve Item 3.1, including Subitems 3.1.1 through 3.1.6, as detailed. <u>Dr. Lindamood moved to approve Item 3.1, as above.</u> Seconded by Ms. Jones. **Motion carried 7-0.**

- 3.2 Board of Health to APPROVE APPROPRIATION INCREASES for Fiscal Year ending 12/31/23:
 - 3.2.1 Beyond the Book for HMG in the amount of \$4,620.00
 - 3.2.2 Community Health Worker funding in the amount of \$87,598.00
 - 3.2.3 Ohio Children's Trust Fund funding in the amount of \$25,000.00
 - **3.2.4** PHEP '24 funding in the amount of \$38,718.35
 - 3.2.5 Get Vaccinated Ohio '24 funding in the amount of \$20,519.50

President Edler requested motion to approve Item 3.2, including Subitems 3.2.1 through 3.2.5, as detailed. Ms. Spoors moved to approve Item 3.2, as above. Seconded by Mr. Alge. Motion carried 7-0.

- **3.3** Board of Health to <u>APPROVE FINAL READING</u> of proposed "Grief Recovery Methods" Training Fee Schedule
 - **3.3.1** Workshop Fee \$85.00 per person, including book/workshop materials/admin fee.

Mr. Alge asked for clarification about the statement in the second paragraph of the Board packet description of the Grief Recovery Methods Training proposal, where it is stated "Hancock Public Health is not interested in offering this to the community at this time." Commissioner Baroudi explained that the purpose of the Grief Recovery Training is for initial rollout of services for HPH staff and their current clients as opposed to immediately opening up trainings to the larger community, which would be more time consuming.

Mr. Alge stated he realized Item 3.3 is for the purpose of fee schedule review and approval, however, he explained that he has philosophical reservations about a program that might combine services for people experiencing grief due to many different grief circumstances (i.e., customers experiencing loss of loved one in same training as customers experiencing loss from divorce). Commissioner Baroudi stated the Grief Recovery Methods Training program is an approved and certified program, thus the HPH representative trainee (currently Brittany Nye) will be required to accept all concepts in the certified training module. Ms. Chamberlin added that in the future if HPH has enough customers with varied grief experiences asking for Grief Recovery services, HPH staff would be sensitive to each customer's grief situation and adapt programming as necessary.

President Edler requested motion to approve Item 3.3, including Subitem 3.3.1., as detailed. Ms. Moody-Russo moved to approve Item 3.3, as above. Seconded by Ms. Jones. Motion carried 7-0. Commissioner Baroudi conducted roll call related to Item 3.4 above:

Roll Call: Mr. Alge (Bill): YES Ms. Moody-Russo (Nancy): YES

Mr. Edler (Brian): YES Ms. Pasztor (BJ): YES Ms. Jones (Karen): YES Ms. Spoors (Robin): YES

Dr. Lindamood: YES

4.0 ADMINISTRATIVE REPORTS

4.1 June/Q2 2023 Financial Report and Analysis – Karim Baroudi

Commissioner Baroudi thanked the Board members who responded to the State Auditor designee for the 2023 Audit that recently occurred. Mr. Baroudi announced the remainder of the audit has been progressing without incident and final results will be shared with the Board as available. Related to a question asked by Mr. Alge, Mr. Baroudi stated if the Board so desires there may be a separate exit interview scheduled for Board members to meet with the Auditor and ask more detailed questions regarding potential deficiencies identified during the audit process. In previous audit years, the exit interview has been waived due to no critical concerns by the Board.

Regarding the recent State audit, Commissioner Baroudi reported many questions were centered around ethics in the workplace and how staff are trained regarding sensitive ethical situations, especially in the government workplace arena. As a result, all HPH staff have recently gone through a one-hour virtual ethics training program; Mr. Baroudi offered same training to Board members for additional CEUs.

Regarding the second quarter budgeting, Commissioner Baroudi summarized his pre-prepared written Financial Analysis Report that had been included in the Board packet earlier in the week. Mr. Baroudi made note of previous discussions about ending cash balance and what has or has not been accounted for. The ending cash balance for June was consistent with previous months. A seven-year budget comparison with revenue/spending trends was summarized, including line-item budgeting reviews by HPH staff. Because some programs have revenue based on seasonal activities/fees and due to the nationwide trend for decreased immunization clinic rates, line items may appear inconsistent from month to month, however, generally these numbers balance out annually. Based on the most recent financial analysis, despite some gaps in revenue and spending in some programs, Commissioner Baroudi stated currently he does not feel any major budget changes are required. Mr. Baroudi stated that through local funding grants/supports, State funding, the plan for recouping immunization clinic fees, the consistent trend of revenue being greater than expenditures, and a watchful budgeting approach, HPH is well diversified enough that one line-item change should not significantly alter the long-term functioning of the agency as a whole.

Regarding billable clinic services, President Edler inquired if HPH keeps track of projected billing amounts. Commissioner Baroudi and Ms. Chamberlin reported there are no exact projections at this time. However, Mr. Baroudi stated now that the electronic billing test was successful for the CMH Program, projections should be much more feasible. Ms. Chamberlin stated that, although she has not run exact statistics, she could come up with an estimate

based on her observation of clinic trends and she feels confident that billable services will meet (if not exceed) budget.

4.2 Medical Director – Dr. William Kose

Dr. Kose announced a Health Resource Fair occurring 9/16/23 that will be centered around priorities identified in the Community Health Improvement Plan (CHIP), notably one of those priorities being increased collaboration among all community agencies.

4.3 Health Commissioner Remarks – Karim Baroudi

Dexcom Project: Commissioner Baroudi reported that, since adding 500 additional study participants, the two staff managing the Dexcom Program are becoming overwhelmed, as those same associates also manage the Mobile Health Clinic and Reproductive Clinic. Dexcom Corporation recently approached Mr. Baroudi and requested to add an additional 1500 study participants to bring the total number of new participants up to 2000, with the intention of longitudinally following these participants from two to five years. Despite HPH having a desire to promote research endeavors, Mr. Baroudi informed the Board he has not yet accepted the offer from Dexcom for 1500 additional participants. Mr. Baroudi reported to Dexcom Corp. that he would need increased staffing, increased space, possibly a stand-alone division if the study were to span two to five years. Mr. Baroudi stated he is planning discussions with Dr. Grace and has been discussing closely with Dr. Kose for collaborative advisement. Dr. Kose opined HPH needs a more formal business plan for the community, as HPH is providing a complete database for a for-profit organization (Dexcom). However, Dr. Kose stated that further Dexcom study participation is a significant opportunity for HPH to increase collaboration with community partners, including educational institutions such as the U of F, and also for HPH to be a part of innovative treatment for diabetes mellitus. Despite the positive opportunities, however, Dr. Kose stated he would want to see more of a planned commitment from Dexcom Corp. before proceeding with 1500 additional study participants, as, per Commissioner Baroudi, the current HPH Dexcom study is beginning to affect all daily operations/departments due to the time-consuming nature of the program. President Edler asked if HPH participation in the current Dexcom study would jeopardize the nonprofit status of HPH; Commissioner Baroudi answered no, as the Health Dept. is not profiting from current Dexcom study participation. Mr. Alge opined there will always be a conflict between not-forprofit and for-profit organizations; Dr. Kose stated because of that conflict, HPH wants to make sure every detail of any additional Dexcom study participation is spelled out carefully in the form of a business plan.

5.0 OLD/NEW BUSINESS

5.1 Personnel

5.1.1 Gary Bright, LSW - Resigned his position as Injury Prevention Coordinator, effective 7/26/23. Personnel Committee conducted an exit interview on 7/20/23; the primary reason for Mr. Bright resigning was identified as personal (secondary to the nature of his grant being changed to regional based). Grant request proposal is not out yet, but it is expected there will be much less funding available for Mr. Bright's position and there will be a much greater workload due to the change to regional rather than local. Mr.

Bright felt he needed to slow down in his professional and personal life and did not feel the changes to his grant-funded position would allow him to do that.

- **5.1.2** Molly Henry, MS Hired as Health Educator/Health Communication Specialist, effective 8/7/23.
- **5.1.3** Commissioner Baroudi reported there is still an open position in the Nursing Department due to the resignation of Allison Pickens. Due to the clinic activity slowing down of late, leadership has decided to put a soft hold on the open nursing position.
- 5.2 Health Commissioner Evaluations: Ms. Jones requested that Board members complete their evaluations of the Health Commissioner and submit evaluation packets by 8/4/23 to HPH front desk staff. Evaluation results will be forthcoming as available.

6.0 CONTINUING EDUCATION

6.1 No CEUs will be offered at the 7/21/23 Regular Board of Health meeting. Board members were encouraged to complete the Ethics Training as described by Mr. Baroudi in Item 4.1.

7.0 NEXT MEETING

7.1 Friday, 8/18/2023, 7:30 a.m., Hancock Public Health, 2225 Keith Parkway, Findlay, Ohio.

8.0 ADJOURNMENT

President Edler requested motion for adjournment of the Regular 7/21/2023 Board of Health meeting. Ms. Spoors motioned the Board of Health to adjourn the Regular Meeting of 7/21/2023 at 9:20 a.m. Seconded by Ms. Moody-Russo. Motion carried 7-0.

Brian Edler, Board President

Karım Baroudi, MPH, Board Secretary