

**Fayette County Board of Health
Meeting Minutes
May 19, 2020**

5:30 P.M.

Board Members Present: Darrell Schaal, President, Vice President, Dawn McDaid, M. D., Julie Aderman, Brad Dunn, D. M. D., John Glennon, Pastor, Kris Luster, Sandra Albright (recorder), Beth Hoffmann, L.C.P.C., and (via telephone Dr. Glenn Skow, M.D.)

Others Present: Heather Jackson, Lisa Ketchem, Allison Sears, Jodi Smith, Elizabeth Washburn, Kendra Craig and Kylie Depew.

Absent: Melissa Storck, Administrator

Call to Order

The Fayette County Board of Health met on May 19, 2020 at the Fayette County Health Department. Schaal moved to call the meeting to order at 5:30 P.M.

Quorum

A quorum of eight members were present.

Prayer – John Glennon

Minutes

Dawn McDaid entered a motion to accept the minutes of the February 19, 2019 meeting. Kris Luster seconded the motion. All were in favor; none opposed. Motion carried.

Those Wishing to Address the Board – none present

Reappoint Board Members:

- Schaal: 1 – year term to expire 6/20/2020- not seeking reappointment
- Potential new appointee, BOH County Board Chair seat- Melissa Storck to approach Fayette County Board President Jeff Beckman and Jenny Waggnor for appointment opportunity. Will need to be voted on during next County Board meeting.
- BOH President: McDaid willing to take seat.
- Brad Dunn, D. M. D recommended by Board members, Vice President

New Business: Staff Reports

Schaal acknowledged Administrator absence and Jackson request to provide update later in presentation.

Financial Report: presented by Kiley Depew

Account Balances	
Checking	\$ 351,750.14
Savings	\$ 1,036.63
Investments Fayette County Bank	\$ 400,000.00
Investments Dieterich Bank	\$ 250,000.00
Investments FNB Vandalia	\$ -
Total Account Balances	\$ 1,002,786.77

FY 2020 Profit & Loss to date	
Total Income	\$ 1,051,355
Total Expenses	\$ 1,023,651
Net Income	\$ 27,703

- Grant billing and payments are ahead when compared to last year
- \$683,690.00 grant monies approved and approximately \$548,000.00 received thus far
- New Covid grant funding will allow for necessary IT upgrades in order to provide contact tracing and HIPAA compliance. Jackson reminded all, company software was hit with computer virus last March, hence upgrades were necessary in order to run day to day operations. All required Windows updates, Windows 10. Looking to obtain company Wi-Fi.
- McDaid questioned truth and taxation levy/ requesting additional funding from County. Schaal responded, would need to have a trust and taxation hearing, levy only able to be raised by 5% and is unable to be done until fall. It is part of the budget process and would require a public hearing. Will need to be coordinated with County Administrator.
- Employee market salary analysis to be conducted by AAIM consulting- in process

Schaal entered a motion to accept financials as presented, motion carried by John Glennon and seconded by Brad Dunn. All were in favor; none opposed. Motion carried.

Organizational updates- No comment from room. Depew stated, “She had a whole list on her white board.” Placed into unfinished business, next meeting.

Unknown person inquired about Administrative Assistant position. Depew stated interviews had been put on hold due to Covid. IT position also noted to remain contracted and not FTE position. placed into unfinished business next meeting

Environmental Health: presented by Jodi Smith

Routine food inspections are not being conducted, instead many informational phone calls, emails, and texts are being completed. Inspection will be completed if complaint is received.

\$50.00 late fee waived for establishments that did not turn in permit applications on time.

1 new body art (permanent makeup) establishment inspection in Feb.

Private sewage permits are being issued. Most inspections are done in person some via pictures. Still collecting water samples. All contractors are still required to notify me before installation as normal

West Nile virus: Dead birds can be submitted as of May 1, have not started advertising yet since it is not a normal spring and we are holding off on that. Planning to conduct WNV testing as normal this summer, testing supplies ordered.

Joyce Storck, contractual food safety inspector to begin helping with inspections

2 food establishments reported to have opened this week, Jodi contacted and notified Josh Morrison, States Attorney. Must prove there is an imminent health hazard.

Home Care: Presented by Elizabeth Washburn

Home Health QAPI Report:

1/1/2020 – 3/31/2020

Patients Served: 89

Falls:

7 total reported falls; 1 with injury and 6 without injury

Common reason: poor transfer technique, not waiting for assistance

Provide frequent reminders

Education: assistive device utilization; patient to request assistance; rise slowly and allow a few seconds after standing up before trying to ambulate.

Infections:

2 total verified infections; 2 UTI with 0 being a catheter patient

Encourage patients to increase their fluid intake and educate on proper hygiene techniques

Rehospitalizations:

20 total hospital admissions; percent for quarter is 22%; up from 18% last quarter

Monthly Rate: January-15% February-11% March-10%; 15.8% is national average

Most common reasons included Pneumonia and A-fib with RVR but also included CHF exacerbation, COPD exacerbation, UTI, chest pain, wound abscess, brain bleed, dislocate hip, liver cancer, sepsis, hyperkalemia, respiratory failure, altered mental status and acute kidney injury

Encourage patients to deep breath and change positions frequently. Also, provide specific disease education that is tailored to each patient.

McDaid asked if we use incentive spirometers. Washburn replied, “no we hope they have them when they come home from the hospital.” Instead we teach breathing exercises, for example pursed lip breathing.

Also reported patient with fall suffered minor injury, skin tear.

Hospice QAPI Report:

1/1/2020-3/31/2020

Patients Served: 14

Falls

2 – 1 with injury and 1 without (same patient in LTC facility).

1/8(AN) facility staff heard an alarm that indicated patient had fallen while getting out of bed but patient was across hall in beauty salon wrapped in blankets when staff got to her; 1/18(AN) Patient was trying to get out of bed without assistance and fell to the floor. Skin tear was noted to forearm.

Common reason: no assistance when getting up

Educate facility staff on fall prevention and signs and symptoms of any psychological medications

Infection Control

0 infections

Continue all infection control education and conservative use of Foley Catheters

Spiritual Care

5 surveys returned

The total number of caregivers that reported the right amount of support for religious and spiritual beliefs from the hospice team was 4. One survey did not answer the spiritual support question.

Continue offering spiritual care and/or counselor at beginning of care and throughout.

Schaal entered a motion to approve both QAPI reports, motion carried by McDaid and seconded by Hoffman. All were in favor; none opposed. Motion carried.

Home Health Program Data:

- Census has declined, not receiving as many referrals from local hospital
- April slow month with 14 referrals
- Covid has led to decreased referrals due to no elective surgeries
- Financials- 2 months report negative income
- We are now in (Patient Driven Group Model) PDGM and are receiving less funding in the beginning of patient episode. We are not expected to receive full payment since we did not make required in home visits, in order to follow infection precautions.

Hospice Program data:

- Census up, in course of 6-day period we admitted 7 patients
- Financials are good at approximate \$90K, Medicare Profit year to date
- Volunteers are not required due to Covid

Challenges:

- Covid-19 caused us to reinvent the way we conducted our day to day operations both in the office and with patient care.
- We have a staggered in office staff schedule that limited the number of people in the office at any given time.
- We spilt all the patients into 3 sections and each section of patients were assigned 1 nurse as their case manager. The nurse managed all their care and visits scheduled from home.
- Any of the patients that required home health aides were split between the aides and also managed from home.
- We tried to limit the number of patients seen per day by the staff to decrease any risk of cross contamination between patients and staff.
- We conduct all regularly scheduled Home Health and Hospice IDG meetings via Go To meeting, we meet once per week for both Home Health and Hospice, including conferencing with therapy.
- Plan- Monday, June 1 “we will come back together” and resume normal in office/ staffing hours.

Updates:

- No staff changes this quarter
- Referrals from SBL-FCH: March 6/26 or 23% and April 1/14 or 7%
- We use to receive about 25% of our referrals from SBL-FCH

Questions:

- McDaid, inquired about using patient testimonials leveraging our good reputation. Washburn replied “Post card mailer has been put on the back burner due to Corona virus.” Casey, Social Media coordinator has been working from home.
- Skow mentioned Dr. D has his own hospice/ conflict of interest and hospital has new providers on board. Recommend Home Health and Hospice representative attend hospital medical committee meeting. 2nd meeting of each month.

Family and Clinical Services: presented by Heather Jackson

April numbers were “horrible” but we were not seeing anyone in the office.

Genetics

No clinic in March

Looking at having a telehealth clinic in May

Lead

3 open cases

Foot care clinic reopened last Thursday

Labs and immunizations still being completed and considered essential.

WIC has been open the whole time. Appointments are done over the phone – coupons are taken out to clients' cars

People are not picking up their coupons.

FCM

No in-person visits until June 30, 2020

EBT – our “go-live” date was changed from 8/31 to 6/8. WIC computer program, Cornerstone has been around for 30 years and will no longer work.

WIC dept. will be closed for training from 6/3-6/5 – will be online instead of in Springfield. So if someone walks in and needs something we will be here.

June 8 will begin new system.

COVID-19 Update: 19 positives, 224 negatives, 13 pending, 14/ 19 recovered, 2 deaths and 326 total tested. Hospital now performing outpatient surgeries and testing has increased.

Learn of positive cases from IDPH, contact them ASAP and then contact anyone with close contact within 48 hours of symptom onset.

Jackson confirms all Covid testing is completed at local hospital and is then sent to IDPH lab located in Carbondale.

McDaid states there is likely many more positives out there when you look at the number of people tested compared to the population. Jackson states we recommend they call their doctor and get an order then call the hospital. Hospital performs curbside Covid NP testing.

FCHD received 2,000 Covid test kits from IDPH overnight. They are being stored here and people will be continued to get tested at the hospital.

McDaid reiterates current barriers to get Covid tested (needing physician order, having to go to hospital) and agrees it would be in the LHD best interest to provide testing.

Hospital twice per day transports labs to IDPH lab. Jackson hopes to partner with hospital. Hospital to continue curbside testing operations but at a grander scale.

“I’ve never done an NP swab in my life” need training.

Our role is education and contact tracing. Contract tracing is completed for all communicable diseases by LHD and is currently staffed by 2 nurses (me and Courtney). 5 in-house team members are capable of also completing task.

McDaid reports 30 contact tracers per 30,000. St. Clair County has received additional funding to complete contact tracing.

Emergency Management Agency (EMA) presented by Kendra Craig

- Well stocked with PPE and have supplied to home health and hospice, local hospital, doctor offices, funeral homes, Long-term Care Facilities and many other frontline and first responders
- Offer supplies to businesses in order to be proactive to stop the spread of Covid
- To begin FIT testing for outside entities, fitted for N-95 masks
- Positive feedback from the community reported

Hoffman inquired about restaurant guidelines. Answered by Smith, stating there are only guidelines and they are just that, guidelines, not law.

McDaid mentioned possibility of citation. Smith answered, States Attorney and Sherriff and are not interested in providing citations.

Craig, went on to explain Emergency Operation Center (EOC) process and community key stakeholder weekly call.

Washburn stated how lucky we are to have EMA in house at the health department. Able to obtain infra-red no touch thermometers.

Jackson reported Clinical Services Team will resume normal working hours next week. We are starting back to school immunizations. Vandalia school district email sent, parents calling. Still maintain all precautions including staggering appointment times, limiting people in waiting room, requesting people reschedule if sick, people are directed to come exactly at appointment time and not early.

Starting June 8, every WIC client must be seen in the office, no more phone call appointments. If client requests a mask, one will be provided to them. All who are seen get their temp. checked. Shots are now scheduled as 30 min. appt. rather than 15 min. to allow for deep cleaning.

McDaid mentioned cloth masks, Craig answered we do have some that were donated. EMA has 8,000 surgical masks. The health department also has its own supply of PPE. Jackson, reports most clients already have own masks.

McDaid inquired, will school open in the fall? Craig stated schools are preparing. Jackson communicated our ongoing working relationship with top school officials. Craig reported schools will need about 1,700 masks per week, Vandalia school district and they are being proactive.

Dunn commented, "On March 30, I ordered PPE and I still do not have it. I ordered one box of 50 disposable gowns and that would allow us to see 25 patients. Before Covid we would see 68 patients per day in our office, we're all in the same boat.

Hoffman reported currently doing telehealth and expected to return to office in June however do not know what counseling guidelines are as of yet. Hoffman also stated, "We are not 6 feet apart now".

Washburn commented, if each person sits at end of each table, then that equals 6 ft. “However the 3 of us have been around each other.”

Washburn reiterated we as a staff are monitoring for signs and symptoms and checking temperatures.

Luster inquired if anyone was furloughed. Depew reported all were considered “salary.” Washburn expressed gratitude to Administrator.

Glennon asked, did we apply for any other grants. Depew replied, “Melissa did not want to, no.” Schaal commented his support.

Glennon requested a thank you be stated in the minutes. Schaal answered yes, we thank all health workers, not those only in this room, but all who have sacrificed, served and put themselves at risk. It is dually noted by this board it is appreciated and we understand the risk you’ve taken, so thank you.

Health Families of IL- Presented by Lisa Ketchem

HFA Accreditation Process- have been going through this process the last year and a half are in last hurdle. Submitted to panel in March- one standard remains out of compliance. 2018 standard had been changed, none of us were made clear and have not been trained. We have learned a lot.

Timeline:

- Completed response to Kathy Astin, Implementation & Accreditation Specialist, PCA, for review/additions/corrections. Kathy approved all submissions.
- Standards out of adherence reviewed by HFA Panel 3/18/2020
- All Standards submitted were in adherence except for Standard 6 sub standards 6-3.C & 6-3.D.
- Training provided on 5/7/20 by Jess Jobe, Technical Assistance and Training Specialist, Ounce Institute, Ounce of Prevention Fund.
- Evidence submitted to Kathy Astin within 3 months, no need to go back to panel.

DHS Site Visit 3/26 & 3/27/2020 was cancelled, to be rescheduled FY21

Process Improvement:

- Want to continue to improve patient charting
- Post and prenatal depression screenings
- Looking to streamline costs

Home visit rate is above benchmark and virtual visits are being completed per HFA guidelines. Families remain engaged.

Doula Services

Previous Program Strengths

- Team work to improve program outcomes, capacity
- Referrals from WIC, providers due to marketing, outreach efforts
- Parent-child activities, including books, handprints, pictures, belly casts, empathy belly, swaddling, sleep sacs

- SIDS prevention
- Doula attended births
- Professional Development
- Group attendance continues to grow, May 7th and 21st- new virtual class
- Doula stats are above benchmark

Doula Services and COVID 19 Challenges:

- Low prenatal group attendance
- No Doula attended births due to hospital restrictions
- Delay in enrollment due to participants requesting in-person visits

Looking Forward:

- Expand Doula Services in FY21 (1 FTE Doula position has been put on hold)
- Obtain new Doula contracts with current and new hospitals
- Increase acceptance rate
- Continue to build caseloads (see clients in 3rd trimester and discharge 2 months postpartum)
- Team building
- Marketing
- Kate has revamped Prenatal Group
 - Addition of new incentives, baby items, books, etc.
- HFA Accreditation Spring 2020
- Prenatal class Thursday, Speaker McDaid to discuss prenatal care

Motion to Approve Staff Reports:

Schaal entered a motion to approve staff reports as presented, motion made by Dunn and seconded by McDaid. All were in favor; none opposed. Motion carried.

No close session

Adjournment

Dunn entered a motion to adjourn at 7:15 p.m. and Aderman seconded the motion. All were in favor; none opposed. Motion carried.

Next Regularly scheduled Board of Health Meeting will be August 18, 2020 at 5:30 in health department classroom.

Sandra Albright _____
 Board of Health Secretary: Sandra Albright SA/jo