LAKE CUMBERLAND DISTRICT HEALTH DEPARTMENT
BOARD OF HEALTH DIRECTORS

March 7, 2017

The Lake Cumberland District Board of Health met on Tuesday, March 7, 2017 at the Russell County Health Department in Russell County, KY.

The meeting was called to order by Judge John Phelps

Those present were:

Pam Bills
Adlie F. Brown, DMD
Hossein Fallahzadeh, MD
Catherine Feese, MD
Linda Hamilton
Steve Kelly
Richard Miles, MD
John Phelps
Gayle Phillips, ARNP
Marlene Richardson, DMD
Gary Robertson
Eddie Rogers
Tommy Shelton
Susanne Watkins, OD
James Wesley

Judge Michael Stephens, Green County Judge Executive authorized Judge Phelps to be his proxy.
Mike Anderson Wayne County Judge Executive authorized Judge Rogers to be his proxy.

Shawn Crabtree confirmed we did have a total of 17 board members/proxies present and was a quorum.

The members absent from the meeting were:
Richard Armstrong
Randy Dial
Lora Elam, RN
John Frank
Patty Guinn
Matt Jackson RPh
L. Bruce Jasper, DVM
Betty Lee
Jake Staton  
Doug Stephens  
Stephanie Southard, MD  
Rosalie Wright  
Sue Singleton  

Staff members present:  

Tracy Aaron, Director of Health Education  
Shawn Crabtree, Executive Director  
Sylvia Ferrell, HANDS Administrator  
Carol Huckelby, Administrative Secretary  
Leah Jasper, Director Administrative Services  
Jamie Lee, Diabetes Program Manager  
Stuart Spillman, Environmental Director  
Amy Tomlinson, Preparedness Manager  
Janae Tucker, QI Director  
Laura Woodrum, Nurse Administrator  

WELCOME  

Judge Phelps welcomed all board members, staff, and guests.  
He introduced Dr. Tommy Shelton, a new board member from Pulaski County.  

As confirmed earlier, a quorum was present.  

LEGAL AUTHROITY  

Approval of Minutes  

Copies from the previous meeting were sent to each board member for their review prior to tonight’s meeting. Dr. Miles made a motion to accept the minutes and Dr. Fallahzadeh seconded the motion. Motion carried.  

Old/New Business  

Judge Phelps asked Board if there was any old or new business to discuss. No old or new business was discussed.  

Naloxone
Board members were notified that the Kentucky Pharmacists Association in partnership with Kentucky Public Health is traveling throughout the state to distribute free Naloxone kits. They will distribute Naloxone at the Pulaski County Health Department. The health department will provide rapid HIV and Hepatitis C testing during this time. Mr. Crabtree asked the Board members to help make the community aware of this opportunity.

**RESOURCE STEWARDSHIP**

**Financial Report**

Shawn gave the Board a packet with financial information for period ending January 31, 2017. The LCDHD balance sheet shows $5,850,446.91 in YTD assets, which is 4.7 months of the average monthly expenses, with $65,916.61 of that owed in current liabilities. LCDHD has $8,569,433.29 in YTD revenues and 8,776,805.05 in YTD expenses resulting in a $207,371.76 YTD deficit. However, using the revenue and expenditure project tool, we’re trending to end the year with only a $3,692.00 deficit, assuming we receive no new allocations of funds from DPH.

DPH is in the process of changing the way Aetna MCO Medicaid payments are paid to us. Instead of being paid to DPH and transferred to health departments, they are working with Aetna to pay us directly for Medicaid services. As this change is in process, Aetna payments are behind, and we have more than $250,000 in unpaid claim. We estimate the majority of these funds are school Medicaid revenue and are therefore pass-through funds. However, some portion it is due our agency for clinic services. This projection assumes DPH gets this conversion completed and caught up before the year ends.

The Insurance Billing / Collection Quality Improvement Process has completed, as we have successfully achieved our final goal, which was to collect as least as much insurance revenue during the 2017 fiscal year as we did during the 2015 fiscal year, which was $40,000. We’re trending to nearly double that goal. Through the end of January, we’ve collected $44,699.37 in clinic insurance revenue. Project that through to the end of the year, calculated to $76,627.49 which would be a 643% increase over the 2016 fiscal year when insurance revenues were only $10,315. Judge Rogers made a motion to accept the financial report. Jim Wesley seconded the motion. Motion carried.

**Grants Report**

The Board received a copy of the Grant Proposal Report. Shawn explained that due to a recent Quality Improvement project a Grants Database has been created to help the agency’s grant seeking process become more efficient. One of the purposes of the database is to track the agency’s grant awards. During the current fiscal year the agency has applied for $1,423,963.00 in grant funds and has been awarded $1,321,488.00. Some of the awards are allocated over multiple years. Therefore, the annual allocation from grants for this fiscal year is $453,493.00. Shawn asked if anyone had questions. No questions.
CONTINUOUS IMPROVEMENT (QI PROJECTS, ETC)

Judge Phelps reminded the board that QI story boards can be found on the website at https://www.lcdhd.org/info-tools/quality-improvement/

Worksite Wellness Project
Jamie Lee reported to the Board that the Worksite Wellness Program’s brochure has been updated adding CPR and Work@Health services. The program’s staff are making presentations at local Chamber of Commerce meetings.

ERRT

HANDS Electronic Family Records
Sylvia Ferrell reported that as of December 5, 2016 our HANDS program is using Electronic Medical Records. This will save money and improve productivity. There are still some enhancements that are being planned such as linking with the State’s billing system. The state is considering using this program as a model throughout Kentucky.

Director/Agency Board Survey
Janae directed the Board to the 2017 Board of Health Survey results. 13 out of 30 board members participated. Overall, Mr. Crabtree’s performance rating was very good; 4.38 out of 5. Mr. Crabtree encouraged the Board to talk to him regarding any concerns they may have. He also directed them to the final page of the report which lists responses to questions posed during the survey.

Board Orientation via Website
Mr. Crabtree reminded the Board that the website has a lot of valuable resources and encouraged them to look at the resources. If needed, he is available to meet with them.

52 Weeks of Health
Mr. Crabtree informed the Board that the agency has developed a new health promotion. 52 Weeks of Health is a social media project that will correspond with various health awareness days. Each week a new health topic will be promoted on the agency’s social media sites. Mr. Crabtree encouraged the Board to share these articles with their friends.

PARTNER ENGAGEMENT

UK/HANDS Research Project
HANDS staff are working with Dr. Corinne Williams from UK on a research project to evaluate HANDS impact on school readiness. 632 kindergarten assessments were compared. 72 of these were HANDS participants. The 72 HANDS children scored comparable to others in school.
readiness. However, the project’s data was not statistically significant due to the small amount of HANDS children evaluated. The research team has decided they will not move forward with applying for federal grant funding at this time.

**Syringe Exchange Program (SEP)**
Dr. Weyman and Tracy are continuing to do community presentations. Dr. Miles has been a great advocate, especially in Russell County. There is a fiscal court meeting next week in Russell County. Jamestown City Council voted to approve the SEP. Also, there is a Fiscal Court meeting in Pulaski County on Tuesday. Tracy and Dr. Fallahzadeh will attend.

**OVERSIGHT**

**Louisville Vitality Update**
Jamie Lee reports that the Louisville Vitality project is going well. We have completed 1,800 screenings this fiscal year which is comparable to last year’s numbers.

**Accreditation Update**
Janae Tucker reports that we are expecting a decision soon regarding our accreditation status. The next PHAB meeting is scheduled for March 16, 2017.

**Human Resources Report**

Pam Godby informed the board that 2 full-time and 1 contract staff has gone off duty and three full-time have been hired since the last meeting.

**POLICY DEVELOPMENT**

**Zika Plan**
Amy Tomlinson spoke to the Board briefly about the Zika Notification SOG (Standard Operating Guidelines) that LCDHD has developed. It spells out specifically who we will notify related to Zika response activities across the district. Of note, board of health members and local county emergency managers will be notified immediately if the district has LOCAL transmission of Zika virus disease. Stuart Spillman spoke to the Board about the spraying and trapping operations planned by the district. Amy asked the county judge executives to notify her about their Spring county clean up dates and tire amnesty dates so LCDHD could possibly provide Zika education and mosquito prevention tips.

**New Policies**

Board members received new and revised policy information prior to the Board meeting.
<table>
<thead>
<tr>
<th>General Admin</th>
<th>Data Analysis Committee to Identify Special Populations at Risk for Poor Outcomes</th>
<th>NEW Policy</th>
</tr>
</thead>
<tbody>
<tr>
<td>IT</td>
<td>Wireless Network Connection Usage Policy</td>
<td>Revised - we no longer have a &quot;Network&quot; password--access is restricted by the employee's logon password instead</td>
</tr>
<tr>
<td>Health Ed</td>
<td>Tobacco Free Employees</td>
<td>Revised - changed title of program from Cooper-Clayton to Freedom From Smoking (FFS)</td>
</tr>
<tr>
<td>Environmental</td>
<td>Rabies Response Policy/Plan</td>
<td>Revised</td>
</tr>
<tr>
<td>Clinic</td>
<td>Appointment Scheduling Policy</td>
<td>Revised - Removed parts r/t Prenatal Program since we no longer offer that service. 1c and 3c were also updated and there were a couple minor wording/formatting corrections.</td>
</tr>
<tr>
<td>Clinic</td>
<td>Authorizations</td>
<td>Revised - removed # 2 from the policy since we no longer contract with OBGYNs for PN.</td>
</tr>
<tr>
<td>School</td>
<td>Coding Policy for the School Nurses</td>
<td>Corrected job titles throughout policy (due to program changes last year).</td>
</tr>
<tr>
<td>School</td>
<td>Emergency Form Review</td>
<td>Corrected job titles throughout policy (due to program changes last year).</td>
</tr>
<tr>
<td>PH Emer</td>
<td>Epidemiology Rapid Response Team Policy</td>
<td>Revised</td>
</tr>
<tr>
<td>PH Emer</td>
<td>Phone Tree Policy</td>
<td>Revised</td>
</tr>
<tr>
<td>PH Emer</td>
<td>Staff Emergency Information Form Maintenance</td>
<td>Revised</td>
</tr>
<tr>
<td>Clinic</td>
<td>Clinical Programs District Quality Assurance Policy</td>
<td>Revised - to reflect program changes and incorporate coding QA policy.</td>
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<tr>
<td>Clinic</td>
<td>Clinical Programs</td>
<td>Revised - removed PN charts and added more family planning charts.</td>
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<td></td>
<td>Local Quality</td>
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<td></td>
<td>Assurance Policy</td>
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<tr>
<td>Sub-Depart.</td>
<td>Policy</td>
<td>Updates:</td>
</tr>
<tr>
<td>Clinic</td>
<td>Cystic Fibrosis</td>
<td>Deleted - no longer provide PN</td>
</tr>
<tr>
<td></td>
<td>Memo</td>
<td>services</td>
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<tr>
<td>Clinic</td>
<td>HPV Testing</td>
<td>Deleted - no longer provide PN</td>
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<tr>
<td></td>
<td>Prenatal Patients</td>
<td>services</td>
</tr>
<tr>
<td>Clinic</td>
<td>Kids Now Plus</td>
<td>Deleted - instructions now on form so we longer need a separate</td>
</tr>
<tr>
<td></td>
<td>(PN6 Adanta Screen)</td>
<td>policy/procedure stating to obtain a release of information</td>
</tr>
<tr>
<td>Clinic</td>
<td>Lead Screening</td>
<td>Deleted</td>
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<tr>
<td></td>
<td>for Headstart Students</td>
<td></td>
</tr>
<tr>
<td>Clinic</td>
<td>Posting of Clinic</td>
<td>Delete - state in AR so no longer need this policy</td>
</tr>
<tr>
<td></td>
<td>Hours</td>
<td></td>
</tr>
<tr>
<td>Clinic</td>
<td>Coding Team</td>
<td>Deleted - incorporated into the</td>
</tr>
<tr>
<td></td>
<td>Quality Assurance</td>
<td>District QA Policy.</td>
</tr>
<tr>
<td></td>
<td>Policy</td>
<td></td>
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<tr>
<td>Organizational</td>
<td>Quality Assurance</td>
<td>Deleted - no longer Director of Nursing to oversee all QA for each program, now QA policies are individualized by program and specific needs/requirements for that program. All QA processes are now followed via the performance management database. Parts of this policy to be integrated into program QA policies where appropriate.</td>
</tr>
<tr>
<td></td>
<td>Policy</td>
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</tbody>
</table>

Dr. Fallahzadeh made a motion to accept the revised and new policies and Judge Rogers seconded the motion. Motion carried.

DISCUSSION

No further discussion

NEXT MEETING
Next meeting is June 27th at 7 p.m. EST at Jamestown Health Department

Judge Phelps asked if anything else needed to be discussed before adjourning the meeting. James Wesley made a motion to adjourn the meeting. Judge Rogers seconded the motion. Motion carried. With no other business, the meeting was adjourned.

Chairman Judge John Phelps

Shawn Crabtree, Secretary

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