

**Buncombe County Department of Health  
Integrated Board Minutes  
October 13, 2011**

The Buncombe County Board of Health and the Social Services Department held the Board of Health Meeting at 200 College St., on October 13, 2011.

**Department of Health Board Members Present:** Dr. Richard Oliver, L.C. Ray, Carol Peterson, Susanne Swanger, Bill McElrath, Winnie Zeigler, Dr. David McClain and Gibbie Harris.

**Staff Present:** Julie Montanea, Nelle Gregory, Dr. Jennifer Mullendore, Rich Munger, Eddie Shook, Linda Tettambel, Lisa Eby, and Terri Rogers.

**Assistant County Manager Present:** Mandy Stone

Chair, Dr. Oliver called the meeting to order at 6:00 pm.

**DISCUSSION & REVISION OF PROPOSED AGENDA/ADOPTION OF AGENDA**

Dr. Oliver inquired if there were any discussion or revisions of the agenda. None mentioned. Ms. Peterson made a motion to accept the agenda as written, seconded by Ms. Swanger.

Dr. Oliver along with Gibbie Harris presented to the Board a possible change of meeting date for November. The Board was asked to consider the date moved from Thursday November 10<sup>th</sup> to Tuesday November 8<sup>th</sup>. The time and location will remain the same if agreed upon. Those members present approved the date change.

**MINUTES**

The minutes of the Board of Health Meeting on September 8, 2011 Meeting were presented. Ms. Peterson made a motion to accept the minutes, seconded by Dr. McClain.

**QUESTION and ANSWER MONTHLY REPORTS:**

**Financial Report**

The expenditure report shows that we are at 25% of the way into the budget year. The payroll expenditures show a slight larger percentage due to 3 payrolls in the month of July. The grand totals for expenditures are at 53.24% due to the unemployment compensation premiums that are paid at the first of the budget year.

In the revenue report, being the first report of FY2012 there are some areas that show a drop in revenues for a varied set of reasons. In WIC and Health Promotions there was a decrease of funding by the state. In Community Protection and Preparedness there is a projected increase due to a PCSI Grant. Community Health Promotions we should see an increase from funding in NFP, Kate B. Reynolds and ABIPA in that program area.

**HR Report**

The HR Report shows no changes from last month.

**Performance Analysis Review**

The PAR for the Department of Health is in the packets.

**Behavioral Health**

The Behavioral Health Report is in the packets. Rich Munger did share with the Board that a recent program called Project Connect/Stand Down. Project Homeless Connect is the coming together of the entire community to welcome people who are experiencing a housing crisis, offering support and barrier-free services for one day. This year's event was held at the First Baptist Church. Rich shared that of the 500 homeless average daily that 400 of those participated in the event. Rich also shared a document from the North Carolina Coalition to End Homelessness. On this document it shares information about Buncombe County having the highest outcomes in the state for ending homelessness in a total of 84 people. Rich wanted to thank the staff of both Health and DSS along with the support of the Board of Health.

**OLD BUSINESS:** None

**NEW BUSINESS:**

**Mobile Food Units-Presentation**

What is a Mobile Food Unit? A vehicle – mounted food service establishment designed to be readily moved. They permitted or issued to unit (no grade card) includes name of sponsoring restaurant Mobile Food Unit requirements (15 A NCAC 18A .2639/.2460). They must operate in conjunction with a permitted restaurant and return daily for cleaning and servicing. They only provide a single service eating and drinking utensils. Potable water system under pressure with hot/cold water provided for food preparation, utensil cleaning and hand washing is a requirement and a Hand lavatory/Single compartment sink/Gray water system. So far in the year 2011 there are 20 permitted mobile food units in Buncombe County.

**DIRECTORS REPORT:** Gibbie Harris

**Lead Update at Asheville Buncombe Technical College**

There has recently been a lead exposure issue at a building on the campus of AB Tech. It was located in the building where an indoor shooting range is set up. The college immediately closed the building off to all staff and students and testing is being done that will help to figure out if any immediate medical needs are an issue. Our disease control staff members have been contacting all those persons and their family members to get this testing done. As of yet no levels are of concern. The college is in the process of finding the source of the spread of the lead particles and how those have spread into the sections of the building that are not located directly in the shooting range. Updates will continue.

**Focus Areas Update from the Past Year**

Buncombe County Department of Health has outlined key agency priorities to help focus the work of the Department. The priorities are to reduce obesity, tobacco, sexually transmitted diseases, infant mortality, unintentional pregnancies and children's health. In addition, BCDH will work to improve immunization rates and focus on community engagement around environmental health issues including safe, adequate drinking water and air quality.

The Community Health Assessment was completed in December 2010.

CHA priorities for 2010-2014 are: promote healthy weights through healthy living; improve women's health during childbearing years; improve children's health outcomes through a focus on family support and education; increase readiness of all students to learn & succeed in school; and assure access to and continuity of a primary care medical home and a mental health home.

BCDH provides data surveillance to monitor obesity data at the national, state and local level including body mass index data for adults and children by age, race, sex, and socioeconomic status. In addition, health behaviors associated with obesity are monitored to help track trends in physical activity and nutrition to monitor intermediate and long term outcomes.

A Healthy Living Opportunities Map was developed by a team that included BCDH, IT, and other GIS and health experts to connect residents with opportunities to be physically active and eat well and to provide information on what amenities are in each park, greenways and trail networks, bike routes, and full service grocery stores. Student interns surveyed 50+ local grocery stores using the Nutritional Environments Monitoring (NEM) Survey to assess their healthy food options.

Health Director asked to coordinate Triple Aim Council for Buncombe County to improve population health around obesity. This will help pull the work of all the community partners into one process that improves population health around prevention, early intervention and clinical care.

New legislation went into effect January 2010 that prohibits smoking in all NC restaurants and bars. BCDH is responsible for maintaining compliance in our local establishments. In the 21 months since, BCDH has received a

total of 53 complaints on 22 businesses. We have followed up with those business owners to provide education and to help bring them in to compliance, and, as a result, no administrative penalties have been necessary. To date, no administrative penalties have been necessary.

A Long Term Care Summit was held June 2, 2011. Nineteen nursing homes and assisted living facilities were represented by thirty-eight individuals. Topics included medication dispensing in a strategic national stockpile event (11 facilities agreed to become push partners), Hepatitis B and needle safety, Norovirus and MRSA prevention and environmental health inspection protocol/ complaint follow-up. Pertussis outreach to local charter school after outbreaks. Meeting was well-attended by school staff; administered 60 doses of Tdap to students, teachers and their families.

Flu Clinics were held last October 2010 at seven different school locations as well as the Biltmore Square Mall, 2,771 flu vaccinations given. Seven school flu clinics are planned for this October. We are contracting with Maxim to provide these clinics resulting in reduction in staff time and reduction in purchase of vaccine, reducing County's financial liability. We are participating with Clear Channel on flu campaign that has engaged high school football coaches to encourage flu vaccination with friendly competition between school district

Adolescent Immunization QI Project is underway. Aim statement was to increase by 10% the number of Buncombe County adolescents ages 11-18 who receive each of the four required and recommended vaccines (Tdap, MCV, HPV, Flu) to improve protection against vaccine preventable disease.

Specific initiatives to address communicable disease issues include a PCSI Grant – State initiative involving 4 counties to integrate screening for multiple communicable diseases associated with the same risk factors. A Chlamydia Awareness Campaign where we are participating in a Campaign to increase awareness of Chlamydia, emphasizing that it is a relatively silent and easily treatable condition. The goal is to test 100+ clients between the ages of 15 and 24 who might not otherwise be tested.

We successfully transitioned Prenatal Care at the end of the year to community. Signed contract with WNCCHS and created coalition approach to the Safety Net for uninsured and underinsured pregnant women.

Monitor the North Carolina Drought Management Advisory Council daily drought classifications to determine if local action is needed related to water conservation. Currently, because of near normal rainfall, Buncombe County isn't under any drought classification

Partnering to develop an Air Quality Flag Program that would place pennant shaped flags on flag poles (under the American flag) represent the current air quality index for that day. These green (good), yellow (moderate risk), orange (unhealthy for sensitive groups) and red(unhealthy) flags are planned to be placed on/in front of designated county buildings.

**CHAIR COMMENT:**

**PUBLIC COMMENT:** None

Mr. McElrath moved that the meeting go into closed session

A motion was made by Dr. McClain to adjourn, seconded by, Ms. Zeigler, the meeting was adjourned.

Respectfully submitted:

Gibbie Harris, Secretary

Adopted:

Richard Oliver, Chair