

A Regular Meeting of the Durham County Board of Health was held August 10, 2017 with the following members present:

Vincent Allison, DDS; Dale Stewart, OD; Arthur Ferguson, BS;  
F. Mary Braithwaite, MD, MSPH; Mary Ann Fuchs, DNP, RN, NEA-BC, FAAN; Spencer “Spence” Curtis, MPA, BS; Rosemary Jackson, MD, MPH, CCHP; James Miller, DVM;

Excused Absence: Teme Levborg, PhD, MSW; Stephen Dedrick, R.Ph, MS and Commissioner Brenda Howerton.

Others present: Gayle Harris, Rosalyn McClain, Joanne Pierce, Bryan Wardell, Chris Salter, Jim Harris, Ph.D.; Michele Easterling, Katie Mallette, Mel Downey-Piper, Will Sutton, Dr. Arlene Sena, Hattie Wood, Khali Gallman, Natalie Rich, Ola Aloba, Ph.D.; Jen Isherwood, Ph.D.is; Joyce Page, Dr. Maria Small, Barbara Rumer and Jannah Bierens.

**CALL TO ORDER:** Chairman Vincent Allison called the meeting to order at 5:02pm with a quorum present.

**DISCUSSION (AND APPROVAL) OF ADJUSTMENTS TO AGENDA:** Chairman Allison and Ms. Harris requested the following additions:

1. Budget Amendments (*new business*)
2. Missions of Mercy (MOM) Dental Clinic (*new business*)

Dr. Fuchs made a motion to accept the additions to the agenda. Mr. Curtis seconded the motion and the motion was approved unanimously.

**REVIEW OF MINUTES FROM PRIOR MEETING/ADJUSTMENTS/APPROVAL:**

Dr. Miller made a motion to approve the minutes for June 8, 2017. Dr. Jackson seconded the motion and the motion was unanimously approved.

**PUBLIC COMMENTS:**

There were no public comments.

**STAFF/PROGRAM RECOGNITION:**

Ms. Harris recognized Dr. Maria Small, Medical Director for the OB clinic at Durham County Department of Public Health. Ms. Harris stated that Dr. Haywood Brown, the previous Medical Director is the current president of the American Congress of Obstetricians and Gynecologists (ACOG). Dr. Small is also the daughter of William “Bill” Small who served on the Board of Health for many years.

**ADMINISTRATIVE REPORTS/PRESENTATIONS:**

- **PERFECT SERVICE INITIATIVE PRESENTATION (*Activity 27.1*)**

Jim Harris and Barbara Rumer provided an update to the Board on the department’s Perfect Service Initiative.

**Jim Harris:** The process began in 2012 when the County sent a group of individuals to the Disney Institute to attend the Disney Approach to Quality Service. The group (comprised of team members from various County Departments) began to look at ways to roll out a similar program in Durham.

After the County group disbanded in 2014, a DCoDPH Customer Service Committee started to meet in 2015. Jim Harris (Dental) chaired the committee which included members from various Department programs. Comments and questions about the process included: “Why/how would we use Disney principles in a public health department?”

A review of the Disney model concluded that their principles could be applied in our work at the Department because they:

- a. Focus on every aspect of service delivery, with a goal to exceed guest’s expectations;
- b. Promote quality staff and guest experiences; and
- c. Develop, refine and adhere to quality business practices.

In 2015, the Department began meeting with Peter Anlyan, consultant and former GM of Durham Bulls. Eventually, the Department entered into a contract with Peter Anlyan to help us move the initiative forward.

At the start of 2016, the Department's Leadership Team began reading/discussing *Inside the Magic Kingdom: Seven Keys to Disney's Success*. In April, 2016, Peter Anlyan met with the Department's Leadership Team members individually to discuss the current status of customer service and visions for improvement.

In May 2016, the consultant met with supervisors to solicit input regarding issues and barriers. Focus groups were then held with all programs to gain feedback from line staff (no administrators present). Information from the sessions was shared with Public Health leadership.

In the summer of 2016, initial program was designed utilizing information from the following:

- Disney Institute Quality Service Program;
- Themes from *Inside the Magic Kingdom*;
- Input of Health Director, Leadership Team, and Focus Groups; and
- County Managing for Results model.

The Health Director articulated a vision for customer care: *We want to be the best local Public Health Department in North Carolina as a well-prepared, high performing work force that delivers high-quality customer service that meets the needs of our community.*

During the fall of 2016, in preparation of Department roll out, all staff received copy of *Inside the Magic Kingdom*. Perfect Service training workshops were held for Leadership Team, with a storyboarding session focused on augmenting principles of the Perfect Service model. Workshops were then conducted for each program (inclusive of all staff, including Division Directors). The Health and Deputy Directors each participated in one of the program sessions. The workshops, which included a workbook, ran for four hours highlighting Perfect Service, communication strategies, utilizing conflict as an opportunity, and principles of teamwork.

With these preparations completed, during the winter of 2017, the Perfect Service Committee was formed. In addition, the Health Director started sending out bi-weekly Monday morning Perfect Service messages to Public Health, with a focus on stories highlighting good customer care within the Department.

During the spring and summer, the Department also hosted its first Booster Sessions between team members and Peter Anlyan. The Booster Sessions are continuous learning opportunities, giving participants a chance to talk about their ideas, challenges, etc., and were designed to be held on a quarterly basis.

**Barbara Rumer:** Early in this time period, the Executive Leadership Team made a commitment to being more visible to everyone at the Health Department.

In the spring 2017, Jim and Peter began meetings with contractors (such as security and cleaning companies, and UNC School of Pediatric Dentistry). At these sessions they shared the Department's Perfect Service model, as well as the message that contractors must abide by our standards for customer care. This was important because patients/customers do not always differentiate between Public Health staff and contractor.

In June 2017, the Perfect Service Committee administered a Communications and Collaboration Survey throughout the Department. The team received 133 completed surveys and reviewed 2,000 comments. If there were statements that required the attention of leadership, the team separated those out, and Jim, as the Perfect Service Team's Leadership Team liaison, brought them to the appropriate parties for resolution.

The team has released the numerical ratings and brief summaries of comments from the surveys to all of Public Health.

Next Steps:

- Format the survey sections for a future presentation to Public Health and to offer potential strategies to address common observations and opportunities.
- As processes move forward, additional updates on the Perfect Service Initiative will be shared with the Board.

[\(A copy of the PowerPoint Presentation is attached to the minutes.\)](#)

**QUESTIONS/COMMENTS:**

**Ms. Harris:** When will we do another survey?

**Ms. Rumer:** Well, we haven't quite figured that out yet...my understanding is we really want to work with what we have right now. We really don't want to let go of where we are right now because we are moving along with these initiatives and we want to make sure that we keep that going.

**Ms. Harris:** I thought you said in the next six months.

**Mr. Harris:** Yes, I would say so but when we look at what's working well in some programs, we might be able share that across programs. One of the things folks said time and time again is they would like to get to know what's happening in other divisions and programs and work with them. So that's one area that we think we can move to. There was a lot of great spots in the survey.

**Dr. Allison:** As far as customer service goes, I know we have been dealing with this since 2012 and I know it's an ongoing and long-term process; but from what you've done so far, has there been any significant changes in the way you handle your customer service throughout the department?

**Mr. Harris:** In certain programs, I do see changes. One thing that has caught on is that I think a lot of the programs are now doing morning huddles. There is more recognition of team members and we know, almost certainly, that the connections with the external customers, those who come to us, are very strong. So, I think if we come back in a couple months we will be able to have more information on that for you without a doubt.

**Ms. Rumer:** We have improved signage, particularly in our parking area. Now when people come in they don't have the frustration of deciding which side of the parking lot to park in. Divisions are working better together so customers have to take less steps when they come in the building because some of that is worked out ahead of time. So, I think that is going on simultaneously with what we have been doing with customers. This is not to say this has been neglected but it works a whole lot better if staff work with each other.

- **BULL CITY UNITED INITIATIVE UPDATE (Activity 9.1)**

Mel Downey-Piper provided the Board with an update on the Bull City United Initiative.

**Ms. Downey-Piper:** In November of 2016, Durham County Department of Public Health launched an exciting new initiative, Bull City United, to reduce shootings and killings in Durham. Bull City United uses an internationally recognized public health model (Cure Violence) to stop retaliatory shootings and mediate conflicts before they erupt into violence.

Eight Bull City United team members are assigned to two different target areas that were selected due to their high per capita level of violence: Census Tract 1300, which covers a section of Durham south of Highway 147, and Census Tract 1401, which covers the McDougald Terrace Public Housing Community. Bull City United relies heavily on the collection of community-level violence data in order to shape daily activities and uses a web-based system developed by the national Cure Violence program to track any violence and the team's response to that violence, mediations and service delivery in the community and among program participants.

Data on violence can fluctuate, so it's critical to monitor trends over time. That said, Bull City United's work may already be starting to pay off since the program was launched in November. Aggravated assaults with firearms in the two communities selected have dropped 33% and homicides are down by 52% countywide over the same comparable time periods (January – June 2016 and January – June 2017).

Ms. Downey-Piper shared the Bull City United video created by the team.

[\(A copy of the PowerPoint Presentation is attached to the minutes.\)](#)

- **PUBLIC HEALTH VACANCY REPORT (Activity 37.6)**

The Board received a copy of the vacancy report (10.2% vacancy rate) through the end of July 2017 prior to the meeting. There were no questions about the report.

[\(A copy of the August 2017 Vacancy report is attached to the minutes.\)](#)

- **NOTICES OF VIOLATIONS (NOV) REPORT (Activity 18.2)**

The Board received a copy of the Environmental Health Onsite Water Protection Section NOV report through the end of July 2017 prior to the meeting.

[\(A copy of the August 2017 NOV report is attached to the minutes.\)](#)

**Health Director's Report**

**August 10, 2017**

**Division / Program: Laboratory/ North Carolina State Laboratory of Public Health Drinking Water Inspection**

**(Accreditation Activity 8.3 – The local health department shall provide or have access to laboratory services capable of meeting routine diagnostic and surveillance needs.)**

**Program description**

- Laboratory services are provided for the Department's Family Planning, STI, Tuberculosis, Immunization and Maternal Health Clinics. Additional services are provided to the Health Education Division for lead exposure prevention/testing, STI Outreach, and Jail Health Program. Services for the Environmental Health Division include Water and Wastewater Program bacteriological testing. The Laboratory also provides services for Lincoln Community Health Center's Early Intervention and Primary Care Clinics.
- The DCoDPH Laboratory was inspected by the North Carolina State Laboratory of Public Health Certification Team on May 18, 2017.
- All laboratories that analyze water from public water supplies are subject to regulation under the North Carolina Drinking Water Act.
- On-site inspections occur, at a minimum, every 2 years and the laboratory must meet all requirements in order to maintain certification.

**Statement of goals**

- The Laboratory will continue to maintain Drinking Water certification through the North Carolina State Laboratory of Public Health by meeting, successfully maintaining, and continually improving upon the North Carolina Drinking Water Act regulatory standards.

**Issues**

- **Opportunities**
  - Provides a learning experience for all participants and encourage discussion among peers regarding processes and improvement opportunities.
  - Offers Lab Technicians and Lab Assistants the opportunity to experience an external inspection process.
- **Challenges**
  - Regulations are numerous, varied, and open to interpretation.
  - Previous 2 years of laboratory documentation must be available to the inspectors.

**Implications**

- **Outcomes**
  - The Inspection Team cited 7 minor deficiencies for the Drinking Water testing process.
  - The Inspection Team made several suggestions to continue to improve processes within the Laboratory.
- **Service delivery**
  - Process changes and planning have been underway since June 2016 by the Laboratory Division Director and Laboratory Technical Consultant.
  - The Plan for Corrective Action was completed by the Allied Health Division Director, Medical Laboratory Supervisor, and Laboratory Technical Consultant.
- **Staffing**
  - DCoDPH staff assisted in process changes, laboratory documentation, record retention, etc.

**Next Steps / Mitigation Strategies:**

- Implement the Plan of Corrective Action for the identified deficiencies.
- Maintain high standards of integrity and efficiency while preparing for the next inspection in 2019.

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**Division / Program: Health Education Community Transformation/Maternal and Child Health**

**(Accreditation Activity 10.1 the local health department shall develop, implement and evaluate population-based health promotion/disease prevention programs and educational materials for the general public; Accreditation; Activity 10.3 - The local health department shall employ evidence-based health promotions/disease prevention strategies, when such evidence exists.)**

**Program description**

5 A Regular Meeting of the Durham County Board of Health, held August 10, 2017.

- A 3-year collective impact grant for Durham County aimed at improving community outcomes for maternal and child health (ICO4MCH) through three aims: improving birth outcomes, reducing infant mortality, and improving the health status of children ages 0-5.

**Statement of goals**

- Address the grant aims by implementing the four evidence-based strategies (EBS) of Long-Acting Reversible Contraception (LARC); Tobacco Prevention and Cessation; Triple P; and the Family Connects Nurse Home Visiting program
- Use a collective impact approach to develop a Community Action Team (CAT) to help guide and implement the EBS

**Issues**

- **Opportunities**
  - Connecting with internal and external partners to leverage and align resources, programs, and educational opportunities for staff, partnering organizations, and the greater Durham community
  - Developing strong relationships with four community members who consistently attend monthly CAT meetings and use feedback from the CAT to inform EBS implementation and components
  - Providing LARCs to Lincoln Community Health Center and increase funding of LARCs at DCoDPH to increase reproductive health services to uninsured women
  - Training providers at DCoDPH and Family Connects in the 5A's evidence-based method of smoking and tobacco cessation counseling
- **Challenges**
  - Electronic Medical Record systems unable to capture smoking/tobacco data effectively, but some system changes have occurred to capture some data
  - Barriers preventing Family Connects' staff from directly accessing patients in Duke Hospital systems
  - Changes in Triple P leadership have added delays in scheduling trainings

**Implication(s)**

- **Outcomes**
  - A total of 443 DCoDPH clients have received a LARC during FY17 (baseline from calendar year 2015: 260; FY17 Goal: 286)
  - QuitlineNC has received 496 unique callers or customers during FY17 (baseline from calendar year 2015: 408; FY17 Goal: 449)
  - 1,611 integrated Family Connects Home Visits during FY17 (out of 3,146 births during FY17)
  - 45 providers trained in 5A's method of smoking and tobacco cessation counseling
- **Service delivery**
  - Resources and education for LARCs is a collaboration between DCoDPH, SHIFT NC, and Lincoln Community Health Center.
  - Services and education for Triple P and Tobacco Cessation and Prevention are hosted through DCoDPH, with Lincoln collaborating on Tobacco as well.
  - The Family Connects program is delivered through the Duke Center for Child and Family Health.
  - Several DCoDPH staff and community partners serve on the CAT.
- **Staffing**
  - A County position is currently being created for the ICO4MCH Project Manager, lead contact for the overall project and LARC.
  - The Tobacco Health Education Specialist in the Health Education division also works with this grant and health educators who work on reproductive health also contribute their numbers to the reports.
  - Triple P staff work under the Community Health division.
  - Family Connects is hosted by the Duke Center for Child and Family Health.
- **Revenue**
  - This is a \$1.5 million dollar grant from the Women's and Children's Health Section of the NC Department of Health and Human Services.
  - The grant funding is divided over three years and ends May 2019.
  - Funds from SHIFT-NC also supplement the salary of the Project Manager.

**Next Steps / Mitigation Strategies**

- Implement various assessments as required by grant funders, including a Health Equity Impact Assessment, Collective Impact Assessment and a Drivers Best Practices Assessment
- Develop and implement a tobacco media campaign dissemination strategy
- Schedule training opportunities for healthcare providers related to LARC and Tobacco

**Division / Program: Dental Division / Tooth Ferry Training and Update**

**(Accreditation Activity 20.2 -Collaborate with community health care providers and agencies to reduce barriers to access to care.)**

**Program description**

- The Tooth Ferry offers oral health services to students in Durham Public Elementary Schools. The vehicle will begin visiting schools in August, 2017

**Statement of goals**

- To resume consistent on-site dental services at specified DPS elementary schools

**Issues**

- **Opportunities**
  - The Tooth Ferry required work, covered under warranty. This included the first servicing of the generator, as well as addressing the electrical issues preventing the slide-out from engaging with inside switch.
  - Martin Hall from LifeLine came on-site on June 22<sup>nd</sup> to provide the driver's with a daylong training session, covering the inside, outside and undercarriage of the Tooth Ferry. (This session complimented two previous half-day trainings.)
  - Martin Hall met with members of the drivers/leadership team to make recommendations for pre/post trips, preventative maintenance plans, and readying the Tooth Ferry for service.
  - The installation of the Compass.com software began on June 22<sup>nd</sup>. This is a monitoring device that will be tracking the generators, compressor, and e-vac machine - sending messages when service is required, and if there are any mechanical issues, etc.
- **Challenges**
  - There are still some items that require attention prior to the Tooth Ferry going out, including relocation of the waste receptacle to the opposite side of the van parking area, addressing any final Risk Management concerns, and working out storage issues in undercarriage compartments.
  - While installation of the Compass.com began on the 22<sup>nd</sup> it was delayed and the company is working with County electrician to identify and utilize conduit pathway to run necessary wiring from the truck box in back to the exterior undercarriage. This will permit the software to monitor the vacuum system and compressor.

**Implication(s)**

- **Outcomes**
  - The Dental Division has completed (and exceeded) recommended training for Tooth Ferry drivers.
  - The team has begun finalizing a maintenance plan, and pre/post trip checklists, as well drafting additional policies for the new Tooth Ferry.
  - The Division has addressed Risk Management concerns related to the door staying open while students enter/exit the Tooth Ferry, and has purchased necessary supplies (24" cones, safety signage, contract gloves, raingear, etc.).
- **Service delivery**
  - The vehicle received a full inspection prior to leaving the repair shop, and is in good working order.
- **Staffing**
  - Dr. McIntosh will provide dental treatment on the Tooth Ferry. A dental assistant (Markita Baltimore) and hygienist (Fariba Mostaghimi) also work on the van. The Division also employs a driver (Herbert Wigfall). Coordinator for the Tooth Ferry is Yolandas Alston, who also serves as a secondary driver and dental assistant. James Brown (mailroom) is the second back-up driver.

**Next Steps / Mitigation Strategies**

- The following steps will be completed, in preparation for the upcoming school year:
    - The drivers will practice operating the Tooth Ferry, fully simulating school site visits. This includes running the generator, operating the wheel chair lift, etc. Not only will this help each driver maintain their operational skills, but the vehicle is made to be run, and sitting idle for any amount of time is not advised.
    - Complete Compass.com installation.
    - Re-establish process for procuring awning for the Tooth Ferry parking pad.
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**Division / Program: Community Health / Immunization and School Health Programs**

**(Accreditation Activity 10.1: The local health department shall provide, support, and evaluate health promotion activities designed to influence the behavior of individuals and groups.)**

**Program description**

- On Saturday, June 17, 2017 from 10 am to 2 pm, Durham County Department of Public Health (DCoDPH) participated in an event honoring the first year anniversary of the Durham Athletic Club, located at 2410 Presidential Drive Suite 102, Durham, NC.

**Statement of goals**

- To provide education to the residents of Durham County regarding the importance of receiving immunizations.
- To provide education to the residents of Durham County about the NC immunization schedule.
- To provide education to the residents of Durham County about the role of the school nurse.

**Issues**

- **Opportunities**
  - To talk with adults and provide education about adult and pediatric vaccines.
  - To provide written educational materials about current vaccine recommendations.
  - To educate about the role of the school nurse.
- **Challenges**
  - Music was being played loudly; DCoDPH staff had to request several times that the DJ turn music down so that patrons and staff could hear one another

**Implication(s)**

- **Outcomes**
  - Booklets were distributed by staff about services offered by DCoDPH as well as information from website, provided by Khali Gallman.
  - Written educational materials about recommended vaccines at the appropriate ages were also distributed to attendees at the event.
  - The role of the school nurses was explained to adults who had children attending school.
- **Service delivery**
  - Approximately 70 adults were educated about immunizations and the role of the school nurse.
- **Staffing**
  - Joy Nolan, RN from Immunization Clinic and Valerie Mitchell, RN staffed two tables for Immunization Clinic and School Health.

**Next Steps / Mitigation Strategies**

- Continue to identify opportunities to educate the community about immunizations and the role of the school nurse.

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**Division / Program: Community Health / OB Care Management (OBCM)**

**(Accreditation Activity 20.1-The local health department shall collaborate with community health care providers to provide personal and preventative health services.)**

**Program description**

- Services are provided to assist Medicaid eligible pregnant women in accessing resources and other services that will lead to good pregnancy outcomes.
- Through additional funding services are also provided to some patients who are not eligible for Medicaid. These are primarily Spanish-speaking patients.

**Statement of goals**

- To increase the number of risk screenings received from Duke High Risk OB Clinic (DHROB) through a fully embedded OBCM pilot model.
- Increase the number of complete and accurate risk screenings DHROB.
- Maintain Client engagement and rapport through the post-partum period.
- Collect data through FY 18 in order to make FY 19 risk screening collection projection(s).

## Issues

- **Challenges**

- Prior to May 2017, the OBCM model was not a fully embedded model. This meant that although there was an OBCM at DHROB five days a week, not all OBCM staff assigned to DHROB were on site at Duke five days a week. OBCM staff divided their working hours between DHROB and DCoDPH.
- New staff members at DHROB were not be familiar with the risk screening referral process.
- For the latter half of 2016, results for risk screening from July to December 2016 on new or transferred DHROB clients ranged from 15.5% to 34.6%. (Average = 25.3%). This data indicated there was room for improvement.

- **Opportunities**

- As of May 2017, two OBCM staff were assigned to DHROB clinic to pilot a fully embedded OBCM model unique to the North Carolina OBCM program. The fully embedded OBCM module is fully operational and both DCoDPH OBCM staff spend 100% of their working hours at DHROB.
- The two embedded DCoDPH OBCM staff functioned as part of the DHROB interdisciplinary team. They attended monthly staff meetings to keep abreast of clinic changes and maintained rapport with the staff. This full time OBCM presence at DHROB allowed for additional face-to-face contacts with clients as opposed to only telephone calls. The face to face benefit of a fully embedded model is consistent with the goal of the NC OBCM program of maintaining rapport with clients and keeping them engaged through the post-partum period. The piloted fully embedded OBCM model was well received at DHROB.
- Fully embedded OBCM staff are readily available to provide assistance with accurately completing risk screening forms.

## Implication(s)

- **Outcomes**

- March to May 2017 data on completed new or transferred DHROB clients risk screening forms indicated positive outcomes. In March, 35.4% or 17 out of 48 new DHROB clients risk screening forms were processed. This number improved in April to 35.9% or 14 out of the 39 new DHROB clients. This increase was more evident in May 2017 when 62% or 16 out of 26 new DHROB clients risk screening forms were processed.
- Above data indicated a positive trend re: increase numbers of completed risk screenings at DHROB. There was an improvement from the latter part of 2016 average of 25.3% to the current 2017 average of 44.4% for risk screening forms received for DHROB clients.

- **Service delivery**

- In collaboration with CCNC, all DCoDPH OBCM staff, DHROB staff and providers and other participating OB providers in Durham County continue to receive educational services re: the importance of risk screening and how the process should flow.
- Year round trainings occur at conferences or workshops that are designed to meet the needs of a facility, county or NC state at large.

- **Staffing**

- Screenings are conducted by each facility's nursing and medical staff.
- The services of the Spanish interpreters were required for Spanish speaking clients.

- **Revenue**

- Accurate and completed screening forms has an impact on DCoDPH revenue. DCoDPH expects to receive \$50.00 (prenatal) and \$200.00 (postpartum) for each client that a risk screening form was completed and accurately billed.

## Next Steps / Mitigation Strategies

- The number of collected risk screening is expected to improve through 2017. Therefore, risk screening data collection will continue through 2017 to track trends and plan corrective or sustainability actions.

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## **Division / Program: Nutrition Division / DINE for LIFE/ Partnering with Durham Parks and Recreation - Walltown Park Recreation Center**

**(Accreditation Activity 10.2 - The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)**



**Program description**

- DINE is a nutrition education program targeting SNAP-eligible families. DINE nutritionists are partnering with Durham Parks and Recreation to bring nutrition programming to the participants of a Mature Adults fitness class at Walltown Recreation Center.

**Statement of goals**

- To improve the nutrition and cooking knowledge and self-efficacy of mature adult participants of the exercise classes.

**Issues**

- **Opportunities**
  - Mature Adults participants meet regularly to attend weekly fitness classes at Walltown Park Recreation Center, offering a captive audience who is interested in maintaining or improving health.

**Implication(s)**

- **Outcomes**
  - DINE nutritionists provided nutrition/cooking programming following the fitness classes for 3 consecutive Tuesdays in June 2017. Each session includes a nutrition and/or cooking component. Participants receive handouts, recipes, taste testes, and educational reinforcements such as cooking utensils imprinted with health behavior tips.
  - Each session had 8-10 participants. Participants and staff seemed to enjoy the nutrition sessions.
- **Staffing**
  - Each session was staffed by one nutritionist.

**Next Steps / Mitigation Strategies**

- Another series of classes are scheduled for fall 2017.
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**Division / Program: Nutrition / Double Bucks/ Success Story Highlighted on State Website**

**(Accreditation Activity 10.2 - The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)**

**Program description**

- Double Bucks is a program run in collaboration with local farmers' markets. Customers shop with their SNAP/EBT cards (formerly known as food stamps) and the markets match their money up to \$10 every time they shop.
- DCoDPH assists with promotion of the program, as well as grant writing, and providing technical assistance. DCoDPH's DINE team assists with marketing and grant writing.
- The Division of Public Health, Community and Clinical Connections for Prevention and Health Branch highlights local successful programming on their website Eat Smart Move More NC so other farmers markets can work to duplicate the program.

**Statement of goals**

- To increase knowledge and awareness of the Durham Double Bucks program.
- To share best practices as well as challenges faced by the program.
- To share insights on how to overcome some of those challenges and ideas on innovative ways to promote the program.

**Issues**

- **Opportunities**
  - The Durham Double Bucks Success Story is featured on the Eat Smart Move More NC website. Other organizations can learn from the Durham Double Bucks program and potentially take on similar programs of their own.
  - The Durham Farmers' Market has the opportunity to discuss being featured on a state website with their partner organizations, calling even more attention to the market and the Durham Double Bucks program.

### Implication(s)

- **Outcomes**
  - The Durham County Double Bucks success story is located at [eatsmartmovemorenc.com/FarmersMarkets](http://eatsmartmovemorenc.com/FarmersMarkets)
- **Staffing**
  - The Nutrition Program Manager overseeing the DINE Community team and the Healthy Environments Nutritionist participated in the interview and editing the story.

### Next Steps / Mitigation Strategies

- Continue to market and grow Durham Double Bucks in order to improve food access in Durham County.
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### Division / Program: Nutrition Division / DINE for LIFE/GoDurham Bus Advertisements

(Accreditation Activity 10.2 - The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)

### Program description

- DINE for LIFE is a school- and community-based nutrition education program targeting SNAP-eligible Durham families. DINE nutritionists created three bus advertisements in English and Spanish for display on the GoDurham buses during the months of April and May.
- Bus riders were surveyed in June to gather data on the effectiveness of the bus advertisements. The bus ads were still posted on the buses in June.

### Statement of goals

- To create effective messaging to encourage simple behavior changes towards healthier food selection and eating habits.

### Issues

- **Opportunities**
  - GoDurham ridership numbers were 603, 947 in April 2017 and 605,952 in May. Bus advertisements have the potential to reach a large number of people in Durham.
- **Challenges**
  - Bus riders reported spending time looking at phones rather than at advertisements.
  - There are multiple advertisements on the buses that compete for riders' attention.

### Implication(s)

- **Outcomes**
  - The three bus advertisements promoted the following health messages: 1) Making a Healthy Choice is as Easy as a Drink of Water; 2) Make Half Your Plate Fruits and Veggies and 3) Sweeten Up Your Summer with Fruits and Veggies- More Matters.
  - 104 bus riders were surveyed in June 2017 at the main bus terminal to gather data on the effectiveness of the bus advertisements:
    - 48% of people responded that the Making a Healthy Choice is as Easy as a Drink of Water advertisement made them want to do something different such as: *drink more water, drink water with meals*
    - 55% of people responded that the Make Half Your Plate Fruits and Vegetables ad made them want to do something different such as: *eat more fruits and vegetables, eat healthier, go get a salad*
    - 57% responded that the Sweeten Up Your Summer with Fruits and Veggies- More Matters ad made them want to do something different such as: *eat more fruits and vegetables, go to the farmers' market*
    - When asked if there was anything different we could do to make the advertisements stand out more, we received many positive comments including: "they look great", "I liked it", "the colors were eye-catching", and "it is beautiful". We also received suggestions for improvement such as: "make the words bigger", "use brighter colors", and "use less words". These suggestions and comments will be used in future planning of bus advertisements.

### **Next Steps / Mitigation Strategies**

- Continue to find creative ways to market healthy eating in Durham County and incorporate survey feedback into marketing plans.
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### **Division / Program: Nutrition Division / DINE/Evaluation Summary**

**(Accreditation Activity 10.2 - The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)**

#### **Program description**

- DINE is a school- and community-based nutrition education program targeting SNAP-eligible families in Durham.
- The DINE school team teaches interactive nutrition classes in eligible (at least half of the students receiving free or reduced lunch) elementary and middle schools throughout Durham County. DINE nutritionists also participate in health fairs, afterschool programs, school gardens, wellness activities, and others, reaching students and parents.
- Every year, the DINE school team conducts multiple surveys and screenings to evaluate the impact of the program.
  - Pre/Post Screenings: Conducted to assess knowledge and behavior change after receiving DINE programming
  - Pre/Post parent surveys: Conducted to assess behavior change from the parent's perspective among students who have received DINE programming.
  - End-of-year parent surveys: Used to assess the impact and quality of the DINE program.
  - End-of-year teacher survey: used to assess knowledge and behavior change among students from teachers' observations.

#### **Statement of goals**

- To evaluate the impact of DINE programming in schools.
- To use information gained from screenings and surveys to improve the DINE program.

#### **Issues**

- **Opportunities**
  - Evaluating the DINE program is essential to the quality of DINE lessons and activities. By evaluating the program, nutritionists are able to see the strengths and weaknesses of the program and use this data to improve program offerings.
  - DINE has recently hired a nutrition specialist with focus on evaluation for the school team. This team member should help the DINE school team to improve the ways they evaluate the program, providing meaningful and impactful data.
  - Duke and RTI have both expressed interest in partnering with the DINE program for evaluation.
- **Challenges**
  - Evaluating the DINE program is a very time consuming process for DINE team members.
  - At the state and regional level, evaluation requirements are changing. There can be a lag between when requirements are established and when the team understands what is needed and how to report that.
  - DINE sends out a lot of surveys and needs a high return rate to get significant results. Getting a high return rate requires a great deal of attention from DINE team members.

#### **Implication(s)**

- **Outcomes**
  - This year, over 7800 DPS students received nutrition/cooking classes through the DINE program.
  - DINE nutritionists taught in more than 340 classes in 13 elementary schools, resulting in more than 1500 lessons taught.
  - DINE nutritionists participated in more than 90 other programs such as health fairs, school-wide events, Hub Farm field trips, and afterschool programs.
  - Nutritionists provided over 5,500 healthy food taste tests this year.
  - Parent Surveys
    - 63% of parents reported that they prepared at least one of the recipes from class at home
    - 88% of parent said that their child talks about nutrition/cooking class
    - 29% of families reported they are eating more whole grains
    - 75% of parents reported their child is more willing to eat healthy foods

- 87% of parents said that their child is more aware of healthy meals and snacks
- Parent Comments:
  - “We have seen a change in her eating especially with snacks. She has been going for a healthier approach. She also likes cooking now.”
  - “My daughter is highly selective and I was worried about the nutrition program making her feel ashamed that she doesn’t like too many healthy foods. Having sat in on a lesson, I was impressed with how non-judgmental and neutral the nutritionist was.”
  - “I love how excited my daughter is about healthy eating. I think it is an important life skill.”
  - “I appreciate that making healthy choices isn’t such a chore anymore. It’s a joint decision.”
- Teacher Surveys: teachers reported that students are:
  - Drinking fewer sugary beverages;
  - Reading the food label more;
  - More interested in cooking;
  - Having more conversations about health and healthy eating;
  - More willing to try new foods;
  - Eating more fruits and veggies.
- Teacher Comments:
  - “They were able to connect how we get our energy from food to the food chains and food webs we've been studying.”
  - “These classes are so great. Provides an opportunity for teachers and students to learn.”
  - “Yes. Our students are more willing to try new things and are making connections between healthy foods and healthy lifestyle”
- Pre/post student screening results
  - 16% increase in 2<sup>nd</sup> graders correctly identifying the whole grain bread
  - 17% increase in 3<sup>rd</sup> graders correctly identifying the healthiest snack
  - 21% increase in 4<sup>th</sup> graders correctly identifying the whole grain food
  - 25% increase in 5<sup>th</sup> graders identifying the definition of mindful eating
  - 42% increase in middle schoolers correctly identifying the heart-healthy fat.
  - 28% of 4<sup>th</sup> and 5<sup>th</sup> graders reported a decrease in their consumption of sports drink and other fruit flavored drinks.
  - 16% of 4<sup>th</sup> and 5<sup>th</sup> graders reported a decrease in their soda consumption
- Pre/post parent survey
  - After completing the program, 24% of parents reported an increase in the daily frequency that their children ate fruit
  - After completing the program, 23% of parents reported an increase in the daily frequency that their children ate vegetables
- **Service Delivery**
  - The DINE Elementary School program during the 2016-2017 school year was staffed by three full-time and two part-time nutritionists and served 13 schools with the series curriculum and an additional nine schools with individual programs.
  - The DINE Middle School program during the 2016-2017 school year was staffed by one full-time nutritionist and served seven middle schools.
- **Staffing**
  - All members of the DINE School Team are involved in survey preparation and distribution, and data collection and analysis.

#### **Next Steps / Mitigation Strategies**

- Use 2016-2017 data to update DINE lessons and programs.
- Bring new evaluation specialist up to speed on current evaluation strategies.
- Explore the possibilities of partnering with Duke and RTI for evaluation needs.
- Explore the feasibility of conducting a longitudinal study on the impacts of nutrition education.

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**Division / Program: Nutrition Division / Clinical Nutrition/Healthy Families Durham Collaboration**  
**(Accreditation Activity 20.2 – The local health department shall collaborate with community health care providers and agencies to reduce barrier to access to care.)**

#### **Program description**

- Pediatric nutrition presentation provided to Healthy Families Durham staff over the course of 2 1-hour sessions.
- Nutrition presentation was a comprehensive review of nutrition guidelines from birth to age 3. Breastfeeding, MyPlate, and strategies to help picky eaters were some of the topics discussed.

13 A Regular Meeting of the Durham County Board of Health, held August 10, 2017.

- Healthy Families Durham is an intensive home visiting program designed to reduce child abuse/neglect, improve interactions between parent and child, and increase parenting skills in families who have multiple stressors.

**Statement of goals**

- To increase awareness of Nutrition Services offered at the Durham County Department of Public Health (DCoDPH).
- To generate referrals for Nutrition Clinic at DCoDPH.
- To provide review of nutrition guidelines for children.

**Issues**

- **Opportunities**
  - Staff at Healthy Families Durham interact with pediatric and adult clients who may be eligible and in need of DCoDPH Nutrition Services.

**Implication(s)**

- **Outcomes**
  - Healthy Families Durham staff gained basic pediatric nutrition knowledge.
  - Healthy Families Durham staff will be able to refer clients to the DCoDPH Nutrition Clinic.
- **Staffing**
  - Presentation conducted by DCoDPH nutritionist.

**Next Steps / Mitigation Strategies**

- Follow up with Healthy Families Durham for future collaborations/needs.
- 

**Division / Program: Nutrition Division / DINE for LIFE/ Alive e-newsletter**

**(Accreditation Activity 10.2 - The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)**

**Program description**

- The DCoDPH DINE program launched a monthly e-newsletter, “Alive!” in April that is targeted to Durham residents that receive SNAP.

**Statement of goals**

- To increase the nutrition knowledge of Durham families by providing healthy recipes, nutrition tips, and information and local resources to help them eat healthy on a budget.
- To encourage simple behavior changes towards healthier eating and activity habits.

**Issues**

- **Opportunities**
  - DINE staff markets the newsletter through workshops and community events. It is also linked to the DINE website.
  - The newsletter contains nutrition tips and healthy recipes with budget friendly and seasonal ingredients. The newsletter also promotes the Farmer’s Market Double Bucks program.
  - Each newsletter contains a link to a short survey to evaluate effectiveness and impact. Survey data will be compiled and used to help guide future newsletters.
- **Challenges**
  - The newsletter is not published in Spanish so we are unable to appropriately communicate in this format to our Spanish-speaking audience.
  - The survey has had low participation rates.

**Implication(s)**

- **Outcomes**
  - The newsletter was sent out in April, May, June, and July 2017. The average open rate is 35%, which is a little higher than average.
  - There are currently 395 subscribers to the e-newsletter.
- **Staffing**
  - One nutritionist writes the newsletter.

### **Next Steps / Mitigation Strategies**

- The DINE Community Nutrition Specialist will continue to collect email addresses for and write, edit, and send out the Alive! e-newsletter.
  - Survey results will be used to improve the newsletter.
- 

### **Division / Program: Administration / Communications and Public Relations**

**(Accreditation Activity 5.3- Health Alerts to Media, 9.1- Disseminate Health Issues Data, 9.5- Inform Public of Dept. / Op. Changes, 10.2- Health Promotion –Disease Prevention, 21.2- Make Available Information About LHD Programs, Services, Resources)**

### **Program description**

- The Communications and Public Relations program provides accurate, timely, and relevant information to the residents of Durham County on key health issues as well as informing the public about department programs and services availability. Information is disseminated in many forms, included broadcast, print, and multimedia (web-based).

### **Statement of goals**

- To increase the public's awareness and understanding of important health information and the Department of Public Health's programs and services availability
- To increase the public's utilization of the Department of Public Health's programs and services.
- To become the main, trusted and dependable choice for journalists seeking information and assistance to develop compelling and balanced stories on Public Health issues.

### **Issues**

- **Opportunities**
  - Being present at events allowed for our work to be captured for historical purposes. Putting more updated material on the website increases viewership. Sending press releases more frequently allows for more familiarity with media and increases our chance of exposure.
- **Challenges**
  - **Event photography and videography at multiple events at the same time.**

### **Implication(s)**

- **Outcomes**
  - Communication surrounding various health issues and department programs and services are being publicized in a timely, organized manner and with greater frequency.
  - Visibility of public health information from the department has substantially increased.
- **Service delivery**
  - Press Releases
    - Stay Connected with DCoDPH June Activities – 6/7/2017
    - “Fight the Bite” Against Mosquitoes – 6/26/2017
    - DCoDPH to Close in Observance of Independence Day – 6/27/2017
  - Website Updates
    - All Press Releases Added to Website
    - June Events Added to ‘Upcoming Events’ page
    - Independence Day Closing Announcement Added to Home Page
    - Added Mosquito Prevention graphic on Home Page
    - Update on Endemic Arboviral Diseases, Lyme Disease, Tickborne Rickettsial Disease, and CDC Guidelines for Zika Virus Testing added to CD Information for Healthcare Providers page
    - Community Connections eNewsletter sent on June 6.
  - Mosquito Prevention Awareness Campaign
    - Mosquito Prevention email sent to Triangle Apartment Association (They will share on their social media.), Hope Valley Neighborhood Association (They will share on their listserv.), Northgate Park Neighborhood Association, Durham CAN (Congregations, Associations, & Neighborhoods), Watts Hospital-Hillandale Neighborhood Association, Forest Hills Neighborhood Association, Grove Park Community Association, Woodcroft Community Association (They will do an email blast.), Burch Avenue Neighborhood Association, Treyburn Homeowners Association, Parkwood Homeowners Association (They will forward to their Google group, print and post flyers, and add an announcement in their newsletter.), Woodlake Homeowners Association, Dover Ridge Neighborhood Association (They will send an eblast and

post of the Facebook page.), Duke Park Neighborhood Association, Morehead Hill Neighborhood Association, & Preservation Durham.

- Emailed County Communications about putting mosquito prevention graphic on County screensavers.
- Mosquito Prevention graphic now on lobby monitors & in social media rotation
- Mosquito Prevention press release now added as a news story to the DCoDPH website
- Request sent to Hudson Oliver to gain access to put graphic on homepage.
- CAS, Inc. – a HOA that operates many communities in Durham will send an eblast to residents.
- Distributed mosquito prevention materials at local Starbucks, Panera Bread, Whole Foods, libraries, and community centers.
- The Links at Thorndale, Mike Embree Insurance, and Triangle Apartment Association shared our Facebook posts with their groups.
- Asked Health Education Program Manager to include mosquito prevention graphic in monthly webinar distribution and health ministry group.
- Contacted Nutrition about distributing the information to the DINE daycares.
- Emailed Durham Police Chief about an Environmental Health Specialist speaking the neighborhood PAC meetings.
- Emailed local summer camps listed under Durham Public Schools, Durham Parks and Recreation, Durham Academy, and Durhamsummercamps.org
- Media Archives
  - The Five Health Problems Affecting Latinos in Durham – 5/31 (Que Pasa)
  - [Triangle Apartment Association Community Outreach for Mosquito Awareness](#) – 6/26

#### **Next Steps / Mitigation Strategies**

- Disseminating consistent & timely content
- Engaging the public on social media to increase page likes and followers
- Increasing the number of monthly eNewsletter subscribers

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#### **Division / Program: Administration / Communications and Public Relations**

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  - **Event photography and videography at multiple events at the same time.**

#### **Implication(s)**

- **Outcomes**
  - Communication surrounding various health issues and department programs and services are being publicized in a timely, organized manner and with greater frequency.
  - Visibility of public health information from the department has substantially increased.
- **Service delivery**
  - Press Releases

- Stay Connected with DCoDPH July Activities – 7/6/2017
- Website Updates
  - New website went live on July 12. Still reviewing access.
- Public Newsletter
  - Community Connections eNewsletter sent on July 3.
- Media Archives
  - Chris Salter interviewed with Brandon Dickson of WPTF Radio about mosquito prevention – 7/5/2017
  - Linnie Supall of Spectrum News (formerly Time Warner Cable News) interviewed Karen McLeod about Durham heat – 7/21/2017
  - Tim Pulliam of ABC11 reported on crypto illness in Durham – 7/26/2017  
<http://abc11.com/health/durham-pool-reopens-after-parasitic-illness-shut-it-down/2252881/>

#### **Next Steps / Mitigation Strategies**

- Disseminating consistent & timely content
- Engaging the public on social media to increase page likes and followers
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#### **COMMITTEE REPORTS:**

- **ENERGY DRINK ACTIVITIES UPDATE (Activity 34.5)**

Ms. Harris provided the committee report in the absence of Eric Ireland. She asked if the Board had any concerns regarding the infographic produced by staff. Board members liked the design and content.

**Ms. Harris:** The Department will move forward with placing the Energy Drink Infographic on retractable banners and displaying them in this building and other locations serving teens and families. The committee recommended that we not create a Board of Health rule to restrict the sale of energy drinks because in the literature reviews we read about corporate opposition other communities faced when similar efforts were undertaken. The committee recommends that we focus on efforts to raise awareness about the effects of energy drinks. We are still going to work on a video.

**Dr. Allison:** I would imagine you will still get some push back still...just by doing that. I'm sure you will get some phone calls.

#### **OLD BUSINESS:**

- **BOARD OF HEALTH POLICY APPROVAL (Activity 15.3)**

The Board of Health, by statute, is authorized to be the policy-making body for the local health department. While the Board does not have to directly approve all policies of the local health department (LHD), it certainly has a role in the policy making process of the LHD. This activity ensures the Board's involvement in this process. The only change was in the review process. The policies will be reviewed annually during the first quarter (July-September) of each new fiscal year rather than "...will be reviewed annually..."

The following policies were sent to the Board for review:

- [BOH: 1-Policy/Procedure Introduction, Implementation, and Review](#)
- [BOH: 2-Delegation of Authority to the Public Health Director](#)
- [BOH: 3-Public Contact with the Durham County Board of Health](#)
- [BOH: 4-Compliance with Public Health Laws and Regulations](#)
- [BOH: 5-Adjudication Process \(Appeals\)](#)
- [BOH: 6-Adopting, Amending or Repealing Durham County Board of Health Rules](#)
- [BOH: 7-Public Participation Policy](#)
- [HD: 20- Employee Recruitment, Retention, and Professional Development](#)

Dr. Fuchs made a motion to approve the eight BOH policies with the change in the review process - annually during the first quarter (July-September) of each new fiscal year. Mr. Curtis seconded the motion and the motion was unanimously approved.

- **ENVIRONMENTAL HEALTH LEGISLATIVE UPDATE**

Mr. Salter provided the Board with an update on several bills that were proposed or passed into law during the NC General Assembly 2017 Legislation Session that impacted or potentially could impact Environmental Health. Board members acknowledged that they had received and reviewed the 2017 Long Session legislative summary.



**Summary Information:**

Section 11E.10 was removed from SB 257. This means that the proposed transfer of On-Site Water Protection from DHHS to DEQ was not approved. It also means that the proposed changes to the REHS Board of Examiners structure will not be made and current configuration will remain intact.

The August edition of the NCPHA newsletter indicates they were able to block the Business Freedom Act that would have retroactively re-validated expired septic system permits going back to the year 2000. The block in fact did not happen and re-validation of permits from 2000 was ratified as part of SB 16. One unanswered question is, if a new permit has already been issued to replace an expired one, which one is valid? Significant impact on Durham County is not expected since much of our work is repair related and new permits. The bill was sponsored by coastal legislators and has a higher likelihood of impacting coastal property permit holders.

SB 257 was ratified and included a special provision lowering the blood lead action level triggering environmental investigation for children less than 6 years old from 10 micrograms per deciliter to 5 micrograms per deciliter. To qualify a child or pregnant women will need to receive 2 consecutive blood lead test results within a 12-month period at or above the new action level. DHHS Environmental Health Section, Childhood Lead Poisoning Prevention Program is expected to add 06 additional regional specialists to help with the anticipated increase in workload.

SB 266 was ratified and effectively required the annexation of approximately 400 property parcels in Durham County that were effectively county islands surrounded by the city but not included within the city limits of Durham. Often referred to as “doughnut holes”, these properties will eventually be provided with all municipal services provided to all other city properties and their residents. This includes water and sewer connections. This will be an expensive venture for the City of Durham since multiple lift stations and much additional piping will need to be added. The bill also added 4 parcels referenced by the Wake County Tax Office to be added to the corporate limits of the City of Durham.

**Mr. Salter:** Gayle likes this one. SB266 only affected Durham and a small part of Wake County. There are about four hundred parcels identified in the Durham section where you have these little doughnuts holes in the City limits. The properties were actually designated as being in the County since they were not incorporated. This bill is already ratified so these parcels are a part of the City now. You can speculate as to why that happened but it makes the property more valuable because now a realtor doesn't have to worry about if the septic system is in good condition. If the system fails, the site will have to be connected to municipal services. *(A copy of the NC General Assembly 2017 Legislation Long Session and a Summary of Session Laws with Environmental Health Impact are attached to the minutes.)*

**NEW BUSINESS:**

• **BUDGET RATIFICATION**

The Durham County Department of Public request approval for needed fee schedule changes for the Family Planning Clinic.

**Family Planning Contraceptives**

Supply limits have prevented the department from being able to procure less expensive Intrauterine Device (IUD) Lileta and injection Depo-SubQ Provera. Therefore the previously used IUD (Mirena) and injection Depo-Provera have to be continued until the new items are sufficiently available. This amendment is also to correct the fee for Depo-SubQ Provera injection to 6.24 (from .01 to .06 per 104 units).

- Mirena 46.47
- Depo-Provera 24.00
- Depo-SubQ Provera 6.24

Mr. Curtis made a motion to approve the budget ratification for the needed fee schedule changes in Family Planning Clinic. Dr. Jackson seconded the motion and the motion was unanimously approved.

• **BUDGET AMENDMENTS**

The Durham County Department of Public request approval to recognize a decrease in funds in the amount of \$1,500.00 from the NC Department of Health and Human Services (Division of Public Health). This grant originally funded the distribution of naloxone in pharmacies and in the community and increase safer prescribing and dispensing of opioids among medical providers and pharmacists.

This year less federal funding was available and Durham was not selected as a high priority community for the remaining funds.

Dr. Miller made a motion to approve the budget amendment in the amount of \$1,500. Mr. Curtis seconded the motion and the motion was unanimously approved.

The Durham County Department of Public request approval to recognize funds in the amount of \$6,488 from the Department of Health and Human Services Division of Public Health for TB Control Services in Durham County. These funds are to be used for Use of interferon gamma release assays (IGRAs) for targeted testing as available.

Dr. Miller made a motion to approve the budget amendment in the amount of \$6,488. Dr. Fuchs seconded the motion and the motion was unanimously approved.

The Durham County Department of Public request approval to recognize an increase in funds in the amount of \$9,045.00 from the NC Epidemiology/Communicable Disease Branch, Division of Public Health.

Funding will be used to support the increased number of screenings of Refugees.

Dr. Miller made a motion to approve the budget amendment in the amount of \$9,045. Dr. Jackson seconded the motion and the motion was unanimously approved.

#### **NALBOH REPORT:**

Dr. Braithwaite shared her experience at the 2017 Annual NALBOH Conference held August 2-4, 2017 in Cleveland, OH.

**Dr. Braithwaite:** I attended the pre and full conference activities. This was a good experience and an exciting opportunity. The big take away from the conference was the importance of collaboration - working with community partners and hospitals to get the work done, serving the community and improving outcomes. A lot of what they talked about, I see here. That was awesome to see that ground breaking work is taking place right here in Durham. There was also a big push for health departments to become accredited through the Public Health Accreditation Board (PHAB). Our state health department is already in the process of working to become accredited by PHAB. The 2018 Annual NALBOH Conference will be in held at the Marriott in Raleigh, North Carolina on August 8-10, 2018. Barbara Ann Hughes, who is the current President, was very instrumental in bringing the conference here next year.

#### **MISSION OF MERCY PROJECT (MOM):**

**Dr. Allison:** The Mission of Mercy Clinic is a free dental clinic that is sponsored by the North Carolina Dental Society and is done throughout the state several times a year. The clinic had planned to come to Durham in June but unfortunately, due to some things out of our control and not enough lead time they will have to scrap efforts to bring it to Durham this year. If the Durham County Department of Public Health partners with the North Carolina Dental Society, there will be a financial piece to it and that's one reason why we wanted Jim to talk about the interactions between the North Carolina Dental Society and Durham County Department of Public Health so far - where we are coming from and where we're headed. Jim, if you don't mind.

**Mr. Harris:** When I met with Dr. Blalock and Dr. Parker from the North Carolina Dental Society they were estimating that a forty-eight chair MOM event would cost somewhere around fifty-six thousand dollars. They would be willing to put up around twenty-eight thousand, if not more. They estimated the event would last 12 hours and would include at least ninety-six dentist and auxiliary staff. If the department participated it would require developing many committees, purchasing supplies and food for the volunteers. The event is planned for June 2019.

#### **QUESTIONS/COMMENTS:**

**Ms. Harris:** Will this clinic be restricted to Durham County residents or will it be one that serves out of county residents as well?

**Dr. Allison:** That was brought up in the Dental Advisory Board meeting. Some communities have done that but it's very hard to enforce. It's not one of those things where we are checking IDs when they sign up to get work done. It was discussed but I'm not sure if we ever came to an answer of whether that would be done or not.

**Mr. Harris:** People actually look at the schedule and see where MOM is going to be and go to those venues. Faith Build is also hosting one in the fall of 2018 and that would be a hundred chair event.

**Dr. Allison:** The next one is in Salisbury and that is in September 2017.

**Mr. Harris:** Dr. Blalock said at the Dental Advisory Board meeting that they do get quite a number of calls asking when the next MOM event is going to be held in Durham. I believe it's been seven years or so since an event was held here.

**Dr. Allison:** I talked to Dr. Parker last night and there was some concerns about the Armory not being as responsive in trying to get them nailed down for the use of their building.

**Ms. Harris:** Is that the National Guard Armory and the one downtown.

**Dr. Allison:** The one downtown....no....the armory by the stadium.

**Mr. Harris:** We talked to them and they were all for it but they said it would have to go through two committees and they only meet quarterly so they would have to give their approval. It was getting very difficult to nail down a date.

**Dr. Allison:** I just wanted Jim to bring this to the Board and Gayle. Jim is going to take this back and work on everything for hopefully next year. There will be a financial piece if we want to bring this to Durham and I guess we would have to find somewhere in the budget to do this, if we want to do it. It's a great experience to work in one of these for non-professionals who can volunteer. It's an amazing experience.

**Ms. Harris:** So, is it usually like Friday or Saturday?

**Dr. Allison:** It's held on Friday and Saturday. They have some pre-screening on Thursday night. The event begins around six o'clock in the morning. The ones that had a pre-screening, they get them right in the chair.

**Dr. Stewart:** What kind of procedures?

**Dr. Allison:** Everything -extractions, restorations and if a lab is on site, partials and dentures...

**Dr. Fuchs:** So is that something we can plan...budget for next year?

**Ms. Harris:** We could, yes we could because there is a great need. This event would tie right into the strategic plans. We could also request to use cost settlement funds to support much of it.

**Dr. Allison:** Thank you Jim. Any other questions about that?

**Ms. Harris:** So we will proceed in working toward the MOM event.

**Dr. Allison:** Now starting in 2018 because of the change in the setup they're going to have two major MOM clinics a year. So if 2019 gets filled up we may have to wait to 2020.

**Ms. Harris:** We need to get on the schedule.

**Dr. Allison:** Yes. We need to go ahead and get on the schedule.

**Ms. Harris:** We will identify the space and time.

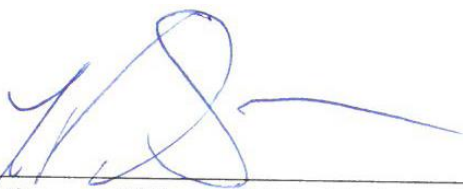
• **AGENDA ITEMS SEPTEMBER 2017 MEETING**

- Data Report—Duke Health Systems
- Smoking Rule Update

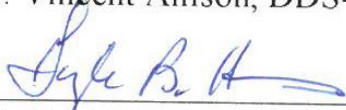
**INFORMAL DISCUSSION/ANNOUNCEMENTS:**

- National Academy of Medicine-site visit on 8/9-10/17
- Gayle will send the link to Communities in Action: Pathways to Health Equity, the consensus report developed by the National Academies of Sciences, Engineering and Medicine.
- Interview process-Deputy Health Director position started with telephone interviews on July 28<sup>th</sup>. In person interviews are scheduled for August 11<sup>th</sup> and 18<sup>th</sup>.
- Eric Ireland's Retirement Celebration will be held on August 31st from 2-4pm in conference room B.
- Congratulations to Commissioner Howerton. She will be installed as President of the North Carolina Association of County Commissioners on August 12<sup>th</sup>.

Dr. Jackson made a motion to adjourn the regular meeting at 6:45pm. Dr. Fuchs seconded the motion and the motion was unanimously approved.



F. Vincent Allison, DDS-Chairman



Gayle B. Harris, MPH, Public Health Director