

A Regular Meeting of the Durham County Board of Health was held April 12, 2018 with the following members present:

F. Vincent Allison, DDS; Arthur Ferguson, BS; Spencer “Spence” Curtis, MPA, BS; MPH, CCHP; James Miller, DVM; Stephen Dedrick, R.Ph, MS; F. Mary Braithwaite, MD, MSPH; Teme Levbarg, PhD, MSW; and Commissioner Brenda Howerton

Excused Absence: Rosemary Jackson, MD and Mary Ann Fuchs, DNP, RN, NEA-BC, FAAN

Others present: Gayle Harris, Joanne Pierce, Tara Blackley, Rosalyn McClain, Chris Salter, Katie Mallette, Mel Downey-Piper, Hattie Wood, Jim Harris, PhD; Will Sutton, Dr. Chitrakala Jagagdeesan, Juma Mussa, Khali Gallman, Rochelle Talley, Donna Wanucha, Marc Meyer, Boyd Taylor, Shayla West, Brandi Kim and Scott Steed.

CALL TO ORDER: Chairman Vincent Allison called the meeting to order at 5:09pm with a quorum present.

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

1. FY18-19 Contract Approval (*old business*)
2. No smoking signs RFP (*old business*)
3. Budget Amendment: Cost Settlement Funds (*old business*)

Dr. Levbarg made a motion to approve the additions to the agenda. Dr. Miller seconded the motion and the motion was approved unanimously.

REVIEW OF MINUTES FROM PRIOR MEETING/ADJUSTMENTS/APPROVAL:

Mr. Curtis made a motion to approve the minutes for March 8, 2018. Commissioner Howerton seconded the motion and the motion was unanimously approved.

PUBLIC COMMENTS: There were no public comments.

Chairman Allison read the new Board of Health statement regarding public comments:

“The Board of Health Meeting is an open meeting. Questions and/or comments from the audience are restricted to the public comment period of the agenda. Anyone outside of the Board who tries to interject into the discussion during the regular board meeting is considered out of order.”

STAFF/PROGRAM RECOGNITION:

Mr. Salters recognized Boyd Taylor, Marc Meyer, Brandi Kim, Shayla West and Scott Steed, Food and Lodging staff members in recognition of enrollment and commitment to the FDA Voluntary National Retail Food Regulatory Program Standards.

Ms. Harris stated that Environmental Health Week is April 30-May 4.

The Board applauded the recognitions.

ADMINISTRATIVE REPORTS/PRESENTATIONS:

- **FDA VOLUNTARY STANDARDS PROGRAM (*Activity 9.2*)**

Mr. Salter, Environmental Health Director and Ms. Donna Wanucha, Retail Specialist with the FDA Office of State Programs provided the board with a brief overview of the purpose of the FDA Voluntary National Retail Food Regulatory Program Standards and the goal of achieving national uniformity at all levels for retail foodservice regulatory programs and tools for potential enhancement of local retail programs (the standards).

Mr. Salters stated that the Environmental Health Division enrolled in the program in October 2017 and are working on Standard 1: Basically a comparison of our regulatory standard, NC FOOD CODE, to the FDA’s latest FOOD CODE, recently adopted 2017 version.

The presentation included the following information:

1. Purpose of FDA Standards Program
2. Voluntary Standards Program
3. How the FDA establish a Retail Program Steering Committee
4. Program development via government, academia, professional organizations, industry and consumers

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5. Two basic principles of highest importance, active managerial control of risk factors, and framework for regulatory programs to follow
6. The 9 program standards

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

QUESTIONS/COMMENTS:

Dr. Levbarg: I was wondering if doing this particular piece - obviously it's a tremendous upgrade of how we're approaching work - is that something that is also reflected when you do national accreditation?

Ms. Wanucha: That's a great question because that is a hot topic right now. As you know currently North Carolina has had their own version of accreditation and it has not translated line to line to the National Public Health Accreditation Board. FDA and National Association of County and City Health Officials (NACCHO) developed a white paper that to made a line- to-line comparison of the program standards and the element in accreditation. There's no duplicated work done and you get credit for what you've done.

Ms. Wanucha presented a certificate of achievement to DCo Food & Lodging staff members (*Boyd Taylor, Marc Meyer, Brandi Kim, Shayla West and Scott Steed*) in recognition of enrollment and commitment to the FDA Voluntary National Retail Food Regulatory Program Standards.

- **2ND QUARTER FINANCIAL REPORT (Activity 39.2)**

Mr. Sutton provided an overview to the Board on the second quarter (October through December) revenues/expenditures and a demonstration of Power BI (Business Intelligence) which was introduced to the County as a tool for enhanced data analysis.

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

QUESTIONS/COMMENTS:

Chairman Allison: Is there any particular reason for the uptake in grants? Was it just more available or people giving us more money?

Ms. Harris: Different ones available. I think one of the larger grants is one we've had over the last couple of years, the Maternal and Child Health grant that is part a collective impact initiative. Also, another team in Health Education and Community Transformation applied for a regional grant for HIV/STI testing and outreach. CDC changed the way they were funding the program, shifting from a focus on individual counties to a regional focus.

Chairman Allison: Now you know what my question is now...Why the dip?

Ms. Harris: There could have been billing errors that carried over and we rebilled them. We recognize that there is some education needed in our billing section. Joanne Pierce, Deputy Health Director is working with staff to address those issues.

Chairman Allison: What percentage of your service charge revenue would you say is 90-120 days that are actually accounts receivable?

Ms. Harris: We don't have that tonight. Joanne will be able to share that information during the next meeting.

Chairman Allison: I'm just curious of the percentage of total collectables that you would consider bad debt or in that collectable area.

Ms. Harris: It's probably a pretty high percentage. The County waits until 10 years before writing off bad debts.

Chairman Allison: So I guess a better question would be on an annual basis, if you just looked at FY2017 collectables, what percentage of the service fee revenue would end up being uncollectable?

Ms. Pierce: I would have to work on that.

Commissioner Howerton: So what's the difference in the debt set-off program for the state and what we're talking about?

Ms. Harris: It's the same.

- **2017 DCoDPH CUSTOMER SATISFACTION SURVEY RESULTS (Activity 27.2)**

Ms. Talley provided an overview to the Board on the 2017 Customer Satisfaction Survey results for the Department. She provided the following program objectives:

- To ensure that Durham County Department of Public Health consumers, clients, community members, community representatives and agency staff have input into DCoDPH services and hours of operation.
- To improve aspects of health care services delivered to clients.
- To improve outcomes of health services and health care delivery and reduce risks.
- To determine if services and hours of operations meet the identified needs of the community.
- To establish staff expectations of self and others and to affect accountability
- To assist in program evaluation

Summary of information shared:

1. More than 90% of our services continue to be rated excellent/very good.
2. 82% of our customers are satisfied with our hours of operation. Only 3% of those surveyed recommended alternate hours most frequently mentioning evenings.
3. Approximately 94% of our customers would recommend our services/programs. This has remained steady for both 2016 & 2017.
4. Most frequently comments referred to our great staff, friendly and respectful service with interactions being informative, attentive and thorough. Customers often expressed appreciation and recognized staff with words including “awesome” and “amazing”.

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

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

The Board received a copy of the vacancy report through the end of March 2018 prior to the meeting. The vacancy rate for March was 6.4%. There were no questions about the report.

[\(A copy of the April 2018 Vacancy report is attached to the minutes.\)](#)

- **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 March 2018 prior to the meeting.

[\(A copy of the April 2018 NOV report is attached to the minutes.\)](#)

COMMENTS:

Dr. Levbarg: I have a question for Bryan. Are we in court with anyone?

Attorney Wardell: We’ve had a flurry of activity. Regarding the matter that we have in court, we were finally able to get Matthew out to do an analysis of the septic system repair needs. The vegetation died down because of the weather. That property is on Patterson Road. His determination was that it could not be repaired. He sent the letter to the family. We are able to require pump and haul but we’re working with the owner. I don’t think they will be able to do that. If it can’t get it resolved soon, we will get our default injunction. It looks like they will have to move. A ten-day notice was sent out to 245 Olive Branch Road. The owner has not responded. We will move more swiftly with that one.

Chairman Allison: Is that a owner occupied home or a rental?

Attorney Wardell: It’s a owner occupied house.

Chairman Allison: But it’s empty?

Attorney Wardell: I don’t know if it’s empty. It appears to be empty.

Chairman Allison: It can’t be empty if it’s discharging

Attorney Wardell: Right. At least on some occasion. So, it’s not clear what’s going on.

Attorney Wardell: Then there is Kimball Drive. Chris got involved and contacted the state. Apparently, this is being used as a mental health facility. We have been successful in contacting the state licensure board. They have issued a letter saying that they’re going to address the issue. If it’s not resolved within the next thirty days or so, then we will press forward with filing a lawsuit. Since there’re licensed as a mental health facility they have more than your average number of people in the facility and that’s probably taxing the system. Since that’s taxing the system and the system is already failing, it makes the problem even worse. But because it is a licensed facility we have to deal with state on how we approach the regulatory process.

Mr. Salter: I received a report following the site visit by the state. There was not an indication of what they would do about the situation. I placed a call to the inspector and told him that once Bryan starts the legal process, the residents will have to be relocated.

Attorney Wardell: There is a flurry of activity. We talked, maybe a couple of years ago, about this happening. There is no option because the soils are not suitable for the kind of systems that these homes and the rules require. We’re starting to have these failures; there are fewer options and the requirements for these discharging systems are more stringent. That lessens the options available. The problem gets more complicated and is just going to get more complicated.

Chairman Allison: I see this turning into a real PR nightmare for the County. As we get more and more of these systems failing and folks don’t have means to make the repairs, folks will start to get evicted from their homes. This is going to exponentially increase. I’m not sure if a conversation needs to happen between the City and the County to figure out a way to extend sewer lines. I can just see this exploding and the County will be the bad guy because we have evicted all of these people from their homes.

Attorney Wardell: So we’ve had that conversation several years back and attempted to talk further about putting a proposal together that would finance sewer expansion from the city into the county. If people wanted to connect and it costs x-amount of dollars, then there would be some dollars to assist with that. The big problem is the cost of connecting even if you had the ability to get city sewer.

Chairman Allison: Gayle is the County Manager aware of this impending problem?

Ms. Harris: We haven't talked about this with the current County Manager. Chris, we need to pull that group back together again and have a conversation with Jay Gibson and the County Manager.

Mr. Curtis: If we start getting pushed on about being the bad guys on this we have to push back and talk about little kids and grandma's kitty cat that runs through the ditch and climbs up on her lap.

Chairman Allison: I understand but I can just see this exploding on the news.

Attorney Wardell: So those are the important issues.

Health Director's Report

Division / Program: Nutrition / DINE for LIFE / Nutrition Education in Durham

(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.
- The DINE school team provides nutrition education and support for wellness initiatives at sixteen Durham Public Schools (DPS) elementary schools.
- The direct education component of the program uses a flexible curriculum that includes a minimum of five core lessons and allows school nutritionists opportunities for additional lessons or activities that are tailored to the needs of each school.
- The administrators at Club Boulevard Elementary are interested in preventing childhood obesity and requested a lesson for the students that specifically addressed this topic. During the 2017-2018 school year, the DINE nutritionist at Club Boulevard Elementary collaborated with the school nurse to provide a direct education lesson on childhood obesity prevention to all 5th graders.

Statement of goals

- To introduce the topic of childhood obesity to 5th graders and discuss four variables that play a role in childhood obesity prevention.

Issues

- **Opportunities**
 - The childhood obesity prevention class was in addition to the normal curriculum, thereby increasing the number of contacts with each 5th grade student.
 - Collaborating with the school nurse to plan and teach the lesson demonstrated to the students that school staff are united with a shared vision of preventing childhood obesity.
- **Challenges**
 - Planning and scheduling was a challenge, since it involved coordination of the schedules of the DINE nutritionist, the school nurse, and the 5th grade classes.

Implication(s)

- **Outcomes**
 - The 45-minute lesson was taught to all three 5th grade classes, reaching 76 students.
 - Using the SNAP-Ed Evaluation Framework guide, a post-survey was developed and administered to the students to evaluate intent to change as reflected in the Transtheoretical (Stages of Change) model. Evaluation results include:
 - ❖ Fruits & Vegetables
 - 70.4% of students report already eating, or trying to eat, 5 servings of fruits & vegetables each day. Of the remaining students, 19.7% are planning to start.
 - ❖ Drinking Water Instead of Sugary Beverages
 - 62.3% of students report already drinking, or trying to drink, water instead of sugary beverages. Of the remaining students, 16.4% are planning to start.
 - ❖ Physical Activity
 - 81.7% of students report already doing, or trying to do, 1 hour or more of physical activity most days. Of the remaining students, 10% are planning to start.
 - ❖ Recreational Screen Time
 - 55.0% of students report already limiting, or trying to limit, recreational screen time to 2 hours or less each day. Of the remaining students, 5% are planning to start.

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- An obesity prevention bulletin board was developed by the nutritionist, nurse, and students. It was displayed in the school and indirectly reached 488 students.

- **Service delivery**

- The lesson began with the nutritionist defining obesity, and discussing the multitude of factors that play a role in the development of obesity.
- The nurse then discussed the increased risks associated with being obese, including heart disease, diabetes, depression, and more.
- Together, the nutritionist and the nurse discussed in detail an evidence-based method for childhood obesity prevention called 5-2-1-0: Five servings of fruits and vegetables, 2 hours or less of recreational screen time, 1 hour or more of physical activity, and 0 sugary beverages (drink water instead).
- After the lesson, students created artwork related to the 5-2-1-0 message and an obesity prevention bulletin board was created and displayed in the school.

- **Staffing**

- One DINE nutritionist and one school nurse staffed the classes with support from classroom teachers.

- **Revenue**

- No revenue was generated by this activity.

Next Steps / Mitigation Strategies

- Based on the evaluation results, the lesson will be updated.
 - The school nurse and nutritionist plan to teach the lesson in subsequent years.
 - The school nurse and nutritionist will meet to discuss the logistics of developing a similar lesson for younger grade levels.
 - The lesson will be made available for use in other elementary schools.
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Division / Program: Nutrition/Health Promotion/Nutrition Education at North Carolina Central University

(Accreditation Activity 12.1: The local health department shall participate in a collaborative process to identify strategies for addressing community health problems.)

Program description

- On February 28, 2018, DCoDPH's Nutrition Division provided nutrition education to students at North Carolina Central University (NCCU).
 - Presentation #1 to NCCU Health Promotion students about the roles and responsibilities of a Public Health Nutritionist and healthy eating for life.
 - Presentation #2 to NCCU Early Childhood Development students about the roles and responsibilities of a Public Health Nutritionist and how to incorporate nutrition and physical activity in early childhood lesson plans.

Statement of goals

- To deliver health promotion and disease prevention education and medical nutrition therapy (MNT) to the residents of Durham County and students of local institutions of higher education.
- To improve dietary habits and increase physical activity.
- To show improvement in making healthy food choices.
- To demonstrate increase in knowledge of healthy food choices and the benefits that result from improvements in daily diet.
- To learn to plan easy, healthy meals and choose healthy snacks.

Issues

- **Opportunities**

- Collaboration between the Nutrition Division and NCCU to promote the goals of both agencies.
- Nutrition Clinic seeks to market its nutrition services.

Implication(s)

- **Outcomes**

- Presentations reached 54 students.

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- A majority of the students in the classes were African American. The presentation may have increased interest in the field of nutrition for these students. More students of color are desired in the field of nutrition.
- **Service delivery**
 - Presentations provided by a DCoDPH Registered Dietitian.

Next Steps / Mitigation Strategies

- DCoDPH's Nutritionists will continue to collaborate with community agencies serving residents in Durham. Nutrition Division nutritionists will continue to serve as guest instructors for students at NCCU for health promotion and disease prevention education.

Division / Program: Nutrition/DINE/Presentation at NC Child Hunger Leadership Conference
(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 Nutrition Division's DINE program presented at the NC Child Hunger Leadership Conference on Feb. 15, 2018. Two DINE Nutritionists, Meghan Brown and Raina Bunnag presented to all attendees about DINE programming, including the DINE in Schools, Childcare, Community and Healthy Environments programs. Specific duties, goals, outcomes and impact on the communities because of this program were highlighted.

Statement of goals

- To highlight the success of DINE and DCoDPH in nutrition education and policy, systems and environmental change work.
- To 'Ignite the Spark' (session title) in other leaders over North Carolina to use creative and innovate programming to end child hunger within their communities.
- To network with other leaders working in the field in order to share resources and lessons learned.

Issues

- **Opportunities**
 - The Governor, Durham County School Nutrition Administration, Special Nutrition Programs Administration, Commissioners, State Health Director, and the NC Attorney General were in attendance and learned about the impact that the DINE is making.
- **Challenges**
 - The presentation was limited to 3 minutes and 8 slides. Contact information of DINE staff was provided in hopes that people will reach out to learn more.

Implication(s)

- **Staffing**
 - Two DINE Nutritionists prepared and executed the presentation.

Next Steps / Mitigation Strategies

- Follow-up with the connections that made at the conference in order to work together to end child hunger throughout North Carolina.

Division/Program: Dental/Treating Pregnant Women
(Accreditation Activity 20.1- The local health department shall collaborate with community health care providers to provide personal and preventative health services.)

Program description:

- The Dental Division is resuming practice of seeing pregnant women in the clinic.

Statement of goals:

- To promote good oral hygiene through regular dental visits as OB patients are at an increased risk for gingivitis and caries. Per the American Dental Association, studies have concluded associations exist between periodontitis and pre-term birth, low birthweight babies, and the development of pre-eclampsia.

- **Issues**

- **Opportunities**

- The Department's new Dental Practice Administrator is a general practitioner with vast experience in treating pregnant patients.
- Dental Assistant from Tooth Ferry will assist Dentist in treatment of OB patients, thus pregnant women can be scheduled as additional column – not fit into open slots.
- In collaborating with the Women's Health Clinic, Dental Division will participate in *Centering* classes, utilizing our bilingual hygienist for the Spanish-only classes.
- During Maternal Health Orientation, information on dental services will be provided, and referral/registration forms will be generated.

- **Challenges**

- Opening up access beyond past practice of seeing patients only on Friday mornings.
- Developing protocols and revising policy (as needed) to reflect goal of treating OB patients throughout all stages of pregnancy.

Implication(s)

- **Outcomes**

- The Dental Division has held first meeting with Women's Health.
- The Division is in process of editing policies and developing procedures to provide standardized care.
- Front desk has begun scheduling patients.

- **Service delivery** – The clinic is planning on scheduling appointments for pregnant women throughout the week.

- **Staffing**- Dentist (Dental Practice Administrator), Dental Assistant, and Hygienist.

- **Revenue** – To be determined.

Next Steps / Mitigation Strategies

- The Dental Division will discuss ways to expand services for pregnant women, and will encourage patients to bring children to the clinic.
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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**

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- 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
 - Go Further with Food This March During National Nutrition Month – 3/1/2018
 - Stay Connected with DCoDPH March Activities – 3/5/2018
 - DCoDPH Announces New Website Launch – 3/15/2018
 - Durham Ranked 11th of 100 Counties in Health Rankings, Up 4 Spots Since 2017 – 3/20/2018
 - DCoDPH to Close in Observance of Good Friday – 3/26/2018
 - Website Updates
 - All Press Releases Added to Website
 - March Events Added to PH Calendar
 - Input March BOH Meeting Agenda on Website
 - Community Connections eNewsletter sent on March 7.
 - Media Archives
 - [Opioid crisis forum grows to tackle human costs of all types of substance abuse. Why?](#) – The Herald Sun – March 5, 2018
 - [Thinking of drinking “raw water?” Why health experts say beware.](#) – The Herald Sun – 3/13/2018
 - [Twice doctors told her she was going to die. Now she’s keeping other women alive.](#) – The Herald Sun – 3/23/2018
 - [A Call for Gun Violence Prevention](#) – NC Health News – 3/23/2018

Next Steps / Mitigation Strategies

- Disseminate consistent & timely content
- Engage the public on social media to increase page likes and followers
- Increase the number of monthly eNewsletter subscribers
- Promote internal communications strategies

Division / Program: Health Education & Community Transformation / Partnership for a Healthy Durham

(Accreditation Activity 1.1 – The local health department shall conduct a comprehensive community health assessment every 48 months)

Program description

- The Community Health Assessment (CHA) is systematic collection, analysis, and dissemination of information about the health of the community.
- The CHA is performed every three years in partnership with Partnership for a Healthy Durham and the local hospital system, Duke Health.

Statement of goals

- To understand health concerns that affect residents
- To identify factors that affect the health of a population
- To assess current efforts, gaps and the Partnership for a Healthy Durham’s role in addressing the top priorities.
- To determine resources available to address these factors

Issues

- **Opportunities**
 - Share results with community members across the county in a variety of methods (in-person, website, social media, print, TV)
 - Use results as conversation starter regarding health priorities and factors that affect health such as institutional racism and poverty.
 - Work with community partners and community members to develop strategies for addressing health priorities in Durham

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- Use results to develop community health improvement plans (CHIP) for Durham
- Change the format of the community health improvement plan (with advance permission from the State)
- Redefine the CHIP process
- **Challenges**
 - Ensure that the results are shared with all areas of Durham County
 - Address policy and systems changes instead of focusing on education and programs
 - Determine what committees the Partnership will have around priority areas
 - Coordinate efforts across partners so efforts aren't being duplicated

Implication(s)

- **Outcomes**
 - The top health priorities as identified by the community are affordable housing, access to healthcare and health insurance, poverty, mental health and obesity, diabetes and food access.
 - The CHA is made of 47 sections in 14 chapters with a total of 446 pages. Ninety-three individuals contributed to the document. Topics range from determinants of health, lifestyle behavior factors, chronic disease, acute illnesses, reproductive health, injury and violence, oral health and environmental health.
 - A new chapter on LGBTQ+ Issues was added to the 2017 assessment. During the writing of the chapter, it was found there is very little Durham County health data on the LGBTQ+ Issues. The Durham County Department of Public Health (DCoDPH) and community partners will have to determine how to address this.
- **Service delivery**
 - DCoDPH staff developed a five-page template for authors in order to reduce the length of the document and make it more user friendly. DCoDPH staff worked closely with writing teams to review and edit chapters.
 - Gayle Harris, Michelle Lyn and Tara Blackley served as editors and conducted a final review.
 - DCoDPH staff also wrote the executive summary and compiled the final document.
- **Staffing**
 - The Partnership for a Healthy Durham Coordinator and DCoDPH epidemiologist facilitated the process and received support from Duke Division of Community Health and community partners.
- **Revenue**
 - None

Next Steps / Mitigation Strategies

- The 2017 CHA was submitted to the North Carolina Division of Public Health on March 5.
- The executive summary will be translated into Spanish and copies of the English and Spanish versions will be distributed to the community.
- A final draft of the CHA is currently available on the Partnership for a Healthy Durham website at www.healthydurham.org. Comments will be accepted until April 6. Final edits will be made and the final report will be released in April.
- A press release, social media postings and community presentations will continue to follow the release of the electronic version of the report.
- Committees will complete CHIPs by September 2018.

Division / Program: Health Education & Community Transformation / Diabetes Awareness Month Events

(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.)

Program description

- The Chronic Care Initiative health educators held two installments of the “What’s the 411?” workshop series in February and March.
- The topics covered were:
 - Eating Healthy and Delicious with Diabetes (February 1, 2018)
 - A Healthy Weight, the Healthy Way (March 27, 2018)

Statement of goals

- To provide information and recipe ideas for healthy eating with diabetes without sacrificing the flavor.
- To explore the basics of weight gain and weight loss and the relationships to overall health.
- To build rapport between local clinical providers and community residents.
- To increase understanding and raise awareness about the relationship between diabetes management, eating and exercise habits.

Issues

- **Opportunities**
 - These sessions were designed with community input and addressed topics in which past participants had expressed interest.
 - Participants attending this event were able to receive information about other events and resources at DCoDPH.
 - Recurring community outreach health education sessions and events allowed for wider distribution of flyers and personalized recruitment. Flyers were also distributed to local partners during various community meetings.
 - A press release and media advisory were sent out informing the public about the event.
- **Challenges**
 - During the February workshop, many participants expressed frustration about the limited parking available. This made a few of the individuals late for the program. There were also some participants who opted for a paid parking option but needed to run out to check on their car to ensure that their parking time did not expire.
 - ❖ To address this issue, the March workshop was moved from the Human Services Building to South Regional Library. This allowed for better parking availability as well as a parking lot that was generally closer to the building entrance as there are some participants with mobility concerns.
 - Since the event occurs during working hours, this does affect the availability of many community members.

Implication(s)

- **Outcomes**
 - On Thursday, February 1, 2018 the 10th workshop in the “What’s the 411?” series, “Eating Healthy and Delicious with Diabetes”, was held at the Human Services Building from 10:00am - noon.
 - Dr. Afreen Shariff from Duke Endocrinology presented tips on healthy eating and recipes. Participants discussed potential barriers to eating healthy and how to overcome them.
 - Twenty-six (26) participants attended. Among the participants that completed an evaluation, 96% agreed that the presenter was knowledgeable of the topic; 100% reported that they were likely to make a change based on the information learned at the event. Some of these changes included “cooking more at home” and “drinking more water”.
 - On Tuesday, March 27, 2018 the 11th workshop in the “What’s the 411?” series, “A Healthy Weight, the Healthy Way”, was held at South Regional Library from 11:00 AM – 12:30 PM.
 - Dr. Carmen Samuel-Hodge from UNC Department of Nutrition guided the group through a discussion on the basics of weight gain and weight loss and provided tips on losing weight the healthy way and keeping it off.
 - Nineteen (19) participants attended. Among the participants that completed an evaluation, 100% reported that they learned something new. 93% reported that they were likely to make a change based on the information learned at the event. Some of these changes included “adding more exercise in my daily activities” and “watching my portion sizes”
 - Three (3) participants in the February workshop signed-up on site for a planned 6-week Chronic Disease Self-Management Workshop which concluded on March 19, 2018.
- **Service delivery**
- **Staffing**
 - 1 Health Education Specialist staffed each event.

Next Steps / Mitigation Strategies

- Consider participant suggestions (e.g., reading food labels, mental health, depression, and chronic pain) for future topics for upcoming series

- Hold the Chronic Pain workshop in June

Division / Program: Health Education and Community Transformation/ National Condom Week (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)

Program description

- National Condom Week (NCW) is usually celebrated the same week as Valentine's Day in the USA. Humor is used to help provide education, and National Condom Week has become a tool to help educate young adults about serious risks involved with unprotected sex. This includes the risk of getting and spreading sexually transmitted diseases including HIV as well as helping to prevent other STDs.
- In observance of National Condom Week, the Health Education and Community Transformation Division, Durham Coalition on Unintended Pregnancy Prevention (DCUPP), North Carolina Central University Student Health Services and Department of Public Health Education (P3 students) sponsored several National Condom Week activities from February 12-16, around the theme #Iplanprotectprevent. The first events were held on Monday and included a relationship conference on the campus of NCCU and condom distribution at Durham Technical College. Tuesday activities consisted of HIV testing and condom distribution at NCCU. Wednesday activity consisted of giving away treats for your sweets bags in NCCU's WG Pearson cafeteria at 11 am and 4 pm. Thursday consisted of testing at Campus Crossing. All events provided educational resources and demonstrated the importance of proper condom use.

Statement of goals

- To raise awareness about HIV/AIDS and other STDS and the impact on different age groups, especially among 15-24 year olds.
- To promote developing healthy sexual relationships and the importance of verbal consent
- To raise awareness of proper and consistent condom use

Issues

- **Opportunities**
 - Collaboration with a group of students focused on pregnancy prevention on campus to plan and implement the NCW activities.
 - Planning and collaboration with community partners.
- **Challenges**
 - Low attendance for some of the events.
 - Two events were cancelled due to lack of support and marketing (offsite) among other community partners

Implication(s)

- **Outcomes**
 - A total of 75 students attended the relationship conference. Presenters were Tanya Bass and Kevin Harrell
 - 53 individuals received free screenings (HIV, Syphilis, Gonorrhea, Chlamydia and Hepatitis C) and 2,300 condom bags were provided along with community information and resources.
- **Service delivery**
 - #Iplanpreventprotect T-shirts were distributed
 - NCCU students were provided with different assignments such as recruitment (students/space), marketing (flyer developed/approved) and fundraising.
 - Two weeks prior to all events, flyers were disseminated on campus and other sites in the community
- **Staffing**
 - Health Educators from HECT
 - NCCU P3 (iplanpreventprotect) students
 - NCCU Student Health Services
- **Revenue**
 - None

Next Steps / Mitigation Strategies

- Start planning for 2018 in September.
- Move more activities off campus.

CORRECTION TO HEALTH DIRECTOR’S REPORT

Mr. Dedrick noted the following typo in the Health Director’s Report “[Twice doctors told her shew as going to die. Now she’s keeping other women alive.](#) – The Herald Sun – 3/23/2018”

Correction: [Twice doctors told her she was going to die. Now she’s keeping other women alive.](#) – The Herald Sun – 3/23/2018

COMMITTEE REPORTS:

There were no committee reports.

OLD BUSINESS:

• **FY18-19 CONTRACT APPROVAL (Activity 39.3)**

At the last meeting, Chairman Allison asked the Board to take a few minutes to look at the contracts list and if they have any questions and questions can be entertained at the next meeting if the Board would like more time to review the list. Ms. Harris provided a detailed description of the contracts on the list.

Chairman Allison asked if there was any further discussion on this agenda item from the Board. There was no further discussion.

Dr. Levbarg made a motion to approve FY18-19 contracts. Mr. Dedrick seconded the motion and the motion was unanimously approved.

• **NON-SMOKING RULE SIGNAGE RFP (Activity 34.4)**

Ms. Downey-Piper explained the purpose of the RFP process for the non-smoking rule signage to the Board which included:

- Solicit proposals (3/9-3/27/18) from qualified firms to provide installation of no smoking signage at bus stops (as needed), specified sidewalk locations and parks/trails throughout Durham City and County area in accordance to the Durham County Smoking Rule.
- Intended result: installation of up to 5,000 no smoking signs.
- Evaluation committee: reviewed and ranked proposals; Design Elements was the only proposal submitted so they were the selected firm.
- Timeline: originally wanted finished by 6/20/18; will need to be Fall 2018 now (160 days from time of execution).
- Minimum cost: \$129,000; complete without complications: \$169,730.

QUESTIONS/COMMENTS:

Dr. Levbarg: So the signs that would be at the bus stops is that the no smoking, no fumar?

Ms. Downey-Piper: Those will still be the small ones, which are the ones on the right.

Dr. Levbarg: So it doesn’t say anything about electronic though.

Ms. Downey-Piper: Those signs do not.

Ms. Harris: I think we need to make that adjustment.

Ms. Downey-Piper: So reprint?

Ms. Harris: Yes

Ms. Downey-Piper: OK

Chairman Allison: I just got a question about the bus stop signs. Are they just going on the post because some of the bus stops have the enclosure; will they go in the enclosure?

Ms. Downey-Piper: The post. What the intent is to use existing posts as much as possible and for the other ones on the left which are much larger signs that are a little bit smaller than a sheet of paper we would put those in the back of the existing signs but a new post will need to be put up.

Dr. Levbarg: Of the signs, the one I think is great is “No Smoking including electronic cigarettes on the sidewalks”.

Ms. Harris: That bus stop sign, people keep bending and breaking it up. You can see the progression of the downfall of the sign. You can just see how it’s starting to be folded and then there is no indication that they shouldn’t smoke there so I don’t know if that sign can be reinforced with something or in some way make it difficult. It’s not working.

Ms. Downey-Piper: It’s true that that signs have come off some of the bus stops; so, it’s something that we can consider.

Attorney Wardell: Is there any PR campaign?

Ms. Downey-Piper: What we're trying to do right now is use Facebook and that sort of thing to let people know about this. We will have more funds in the budget moving forward so we can advertise through contractual vendors.

Attorney Wardell: It seems to me last time we rolled it out there was some fanfare but even that wasn't enough.

Ms. Harris: We started the conversation six months before it rolled out.

Attorney Wardell: Right. And even that wasn't enough. So, it seems like we would have to do some radio, billboards to really let people know this is what's going on because a lot of people didn't know what was going on.

Ms. Downey-Piper: Are you speaking specifically about the sidewalk piece of it?

Attorney Wardell: I'm talking about all of it because we have descriptive regulations about this since 2012 and there's still people that don't know about this.

Ms. Harris: But smoking is far less here than it is in some other places.

Chairman Allison: Have you had conversations with the "Go Durham" in terms of the credit card bus passes people have put some wording on that bus pass "No smoking at bus stops" or something like that so they will see it on their bus pass.

Ms. Harris: We have not had that conversation but that is a good idea. On the buses they announce the next stop and announce different things and so there is way that they could program so say "There's no smoking allowed at bus stops".

Ms. Downey-Piper: Yes, we can definitely reach out to them and learn more about that.

Dr. Levbarg made a motion to proceed with developing a contract with Design Elements for the no-smoking rule signage with an amount not to exceed \$169,730. Dr. Miller seconded the motion and the motion was unanimously approved.

NEW BUSINESS:

- **BUDGET AMENDMENT:**

The Durham County Department of Public Health request approval to recognize funds in the amount of \$655,363 for the SFY 2013 Medicaid Cost Settlement Payback and the Board of Health Smoking Rule Signage Installation costs with the funding source being the recognition of a portion of Medicaid Cost Settlement funds received in current fiscal year 2018 above what was originally budgeted and authorize the County Manager to execute a contract with Design Element for the Smoking Rule Signage Installation.

SFY 2013 Cost Settlement Payback

As a result of changes in rules governing the Medicaid Cost Settlement process, Durham County Department of Public Health is required to pay back \$485,633. The initial SFY2013 cost settlement received was based on old settlement rules which have now changed following a lawsuit which the Division of Medical Assistance (DMA) prevailed over local health departments. SFY 2013 is the only period where an overpayment is applicable because DMA began applying the new settlement rules **prior** to cost settlement payments being made beginning in SFY 2014.

Board of Health Smoking Rule Signage Installation and Contract Approval

The BOH Smoking Rule covers many outdoor public spaces, such as parks, trails, sidewalks, and bus stops. Since most of these sites have inadequate signage, new installation or replacement signage (replacing damaged or removed signs) is needed. The cost is not to exceed \$169,730 to pay for the installation of no-smoking signs at sites covered by the Rule.

Mr. Dedrick made a motion to approve the budget amendment in the amount of \$655,363. Dr. Miller seconded the motion and the motion was unanimously approved.

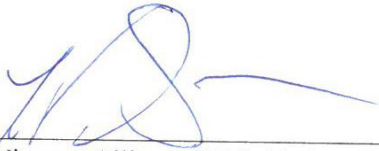
- **AGENDA ITEMS APRIL 2018 MEETING**

- ClearPoint Demonstration
- Budget update

INFORMAL DISCUSSION/ANNOUNCEMENTS:

Ms. Harris discussed the new Human Service Building Security Screening Process.

Dr. Levbarg made a motion to adjourn the regular meeting at 7:03pm. Mr. Dedrick seconded the motion and the motion was unanimously approved.

A handwritten signature in blue ink, appearing to read 'F. Vincent Allison', written above a horizontal line.

F. Vincent Allison, DDS-Chairman

A handwritten signature in blue ink, appearing to read 'Gayle B. Harris', written above a horizontal line.

Gayle B. Harris, MPH, Public Health Director