

**Foothills Health District  
 District Board of Health OPEN SESSION  
 \*REMOTE\* Meeting Minutes  
 Rutherford County Administration Building  
 May 26, 2020**

**Board of Health Members Present:**

Rutherford County Representatives [9]	McDowell County Representatives [6]
Kim Warner Dr. Jerald DeLaGarza Greg Lovelace, County Commissioner [by video remote] Dr. Christopher Buchanan [by video remote] Neil Perry [by video remote]	Dr. Ben Hall Carol Wolfenbarger

**Board of Health Members Absent:**

Amy Jenkins Dr. David Sutton Two Vacancies [Bradley and Sargent]	Lynn Greene, County Commissioner Julie Harris Dr. James M. Gaskill One Vacancy
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**Foothills Health District Staff/Guests/Counsel Present:**

**HD Staff:**

Karen Powell, Health Director  
 Nancy Marshall, Finance Director  
 Jason Masters, Environmental Health Director

**Board of Health Legal Counsel**

Sharon Parker, Board Attorney

\* Please note: Due to the COVID-19 pandemic and Governor Cooper's Executive Orders limiting the size of indoor gatherings, even with social distancing, this meeting was held in the Commissioners Chambers at the Rutherford County Administration Building at 289 North Main Street Rutherfordton, NC so BOH members could participate in the meeting by two-way video [zoom] and the meeting could also be live streamed on the Rutherford County Government Channel. See the remote meeting provisions in Senate Bill 704 as codified as Session Law 2020-3.

AGENDA ITEM	BOARD ACTION	REFERENCE DOCUMENTS
<p><b>SWEARING IN OF BOARD MEMBER:</b> Neil Perry, a pastor from Rutherfordton, was sworn in by Sharon Parker immediately before the meeting started. Mr. Perry's term started May 26, 2020 and will run to May 26, 2023.</p>	<p>Sharon Parker, Board Attorney and Notary</p>	
<p><b>CALL TO ORDER:</b> Chairman Dr. Ben Hall called the meeting to order at 6:30 pm. <b>A quorum is present with the in person Board members and the members attending remotely under the COVID-19 Remote procedures as the Foothills BOH currently has three vacancies.</b></p> <p>Please note: Due to the COVID-19 pandemic and Governor Cooper's Executive Orders limiting the size of indoor gatherings, even with social distancing, this meeting was held in the Commissioners Chambers at the Rutherford County Administration Building at 289 North Main Street Rutherfordton, NC so BOH members could participate in the meeting by two-way video [zoom] and the meeting could also be live streamed on the Rutherford County Government Channel. See the remote meeting provisions in Senate Bill 704 as codified as Session Law 2020-3.</p>	<p>Chairman Dr. Ben Hall</p>	<p>N/A</p>
<p><b>PUBLIC COMMENT PERIOD:</b> The Board Public Comment Policy had been circulated with all Notices for the meeting and posted. No public members were in attendance for this meeting.</p> <p>Questions pertaining to the Board's email addresses, departmental website links, enforcement of the Governor's Executive Orders is noted, and processes for notifying the Health department, employers, or the public after positive COVID test results had been emailed by Ms. Deborah Keller, a reporter for the RC Catalyst. Ms. Parker read Ms. Keller's comments and questions. According to the Public Comment Policy, board members did not respond directly to questions but the District Health Director addressed several in her Health Director's report and then emailed responses to the other questions.</p>	<p>No Board action required</p>	<p>N/A</p>
<p><b><u>ACTION ITEMS</u></b></p>		



<p><b>Approval of Minutes from January 14, 2020</b></p>	<p><b>Kim Warner moved to approve the January 14, 2020 minutes as presented, with a second by Carole Wolfenbarger. The motion was approved with remote votes from Neil Perry, Greg Lovelace, and Dr. Buchanan, and in person votes by Dr. Hall, Carol Wolfenbarger, and Kim Warner.</b></p>	<p><b>Documents on file</b></p>
<p><b>HEALTH DIRECTORS REPORT: COVID-19</b>  May 26 was Day 75 in the McDowell Emergency Operations Center [primarily staffed by Mrs. Powell] and Day 69 in the Rutherford Emergency Operations Center [primarily staffed by Lee Arrington]. McDowell was the first county in the state to establish an on-line COVID screening program and a COVID hotline staffed every day. These programs were quickly replicated in Rutherford County.</p> <p>As of May 26, 2020, 1198 COVID 19 tests had been performed in Rutherford County with 173 positive results. As of May 26, 2020, 920 COVID 19 tests had been performed in McDowell County with 46 positive results. The department does not have anti-body testing and are testing for the live virus. The department does not count second positive tests results for the same patient. Testing is performed by the State Lab.</p> <p>Mass testing, quarantining, and contact tracing is underway in both counties. Patients are isolated until test results are received and, if positive, quarantined for 14 days or until symptoms are resolved. When a positive test result is received, staff notifies the patient and interviews the patient to identify contacts and risk factors and, then, to discuss ways to appropriately quarantine, to use of PPE, and how to clean their surroundings to minimize transmission to others. Staff are very careful to try not to identify patients and use DHHS guidelines to notify contacts that they may have been exposed, to arrange for the contacts to be tested, and to arrange for the contacts to self isolate</p>	<p><b>Karen Powell, Health Director</b></p>	<p><b>N/A</b></p>

until the test results are back. In addition, staff notify employers so they can take appropriate workplace precautions. Staff offers testing to all employees, and discusses proper PPE and proper cleaning. Staff also call all quarantined patients daily to determine their status and that of their family or close contacts.

The NC DHHS goal is to have 5% of each counties' population tested within one month. The department is on track with that goal and is testing anyone who comes to a community testing event, which are scheduled often. In addition, tests can now be done at the Health Department, hospitals and clinics. All positives are reported to the Health Department.

Some staff has been working straight for 75 days, for 10-12-15 hour days. Mrs. Powell is trying to rotate staff so they are not all working 7 days straight. At this time, they have enough staff to do this work, but expressions of Board and community support is helpful and appreciated.

NC DHHS has its own tracking system, which does not always sync with the counties numbers due to lag time with the state. NC DHHS is creating a special new tracking system for COVID.

Under the Governor's Safer at Home Phase I Executive Order, all clinics in the Health Department were closed except for mandated services for WIC, STD, Communicable Disease, TB, and Immunizations. Under the new Safer At Home Phase II Executive Order which will be phased in over the next week, the Health Department is looking to open up Family Planning, child, and other clinics.

Mrs. Powell defines success for the Health Department: Get as many people as test positive in quarantine and identify at risk contacts so they can be isolated pending testing. Most of the current positives are from community transmission. It is very concerning that we are seeing increased community transmission even before Phase II starts.

If any of the Governor's Orders are violated, it is up to local law enforcement to enforce the Order. The Health Department may inform local law



enforcement that an enforcement issue exists, but law enforcement determines whether and how to take action.

[Dr. DeLaGarza joined the meeting.]

**FINANCE REPORT for FY 2019-2020 and FY 2020-2021:**

Nancy Marshall, CFO, is working to have the current deficit of \$587,469 in the proposed FY 2020-2021 budget balanced by the end of June. They are looking at \$163,000 in hard cuts, \$25,000 in miscellaneous cuts, and \$200,000 in COVID grants, among other things.

The federal CARES Act funds are directed to counties but not to Health Departments or multi-county Health Districts. Mrs. Powell has been lobbying NC DHHS to see if some of these funds can be sent directly to Health Districts as the counties are not passing these funds on to the Health District. It is key that the Health District obtain funds from the CARES Act to cover these unexpected costs and reduced income from closed clinics.

In addition, the Health District can apply directly to FEMA for certain funds due departmental costs exceeding the FEMA minimum threshold. The FEMA funds are restricted.

When they submitted a 5-year budget to the counties for FY 2020-2021, they asked for more county appropriations to cover the expected deficit but did not get any more funds appropriated from the counties.

In preparing the FY 2020-2021 budget, they are trying to determine unmandated services that may be reduced or stopped to help balance the budget.

Mandated Services include WIC, STD, Communicable Disease, TB, Immunizations, Maternal, and BCCP. The Health District's budgeting process begins with a deficit due to mandated services that are not reimbursed at a level that covers costs. The statewide sentiment is that the Legislature may be more likely to reduce mandated requirements than to award more funds for health services. Currently, finance staff are

**Nancy Marshall, CFO  
Karen Powell, Health  
Director**

**Documents on file**

<p>trying to increase revenues and decrease costs to help balance the nearly 600k deficit.</p> <p>Mrs. Marshall reviewed the April Profit and Loss Report [ P &amp; L], which shows that the Medicaid Cost Settlement [MCS] has been received but clinic revenue has dropped due to pandemic. Mrs. Marshall noted the new, lower MCS amount is the expectation for the future.</p> <p>In addition, Mrs. Marshall and Mrs. Powell will have to recommend to the Board whether to repay the \$150,000 pulled from the BOH restricted fund balance for current year expenses.</p> <p>Mrs. Marshall reviewed the proposed budget amendments.</p>	<p><b>Kim Warner moved adoption of the proposed budget amendments as presented, seconded by Dr. DeLaGarza. The motion was approved with remote votes from Neil Perry, Greg Lovelace, and Dr. Buchanan, and in person votes by Dr. Hall, Carol Wolfenbarger, Kim Warner, and Dr. DeLaGarza.</b></p>	
<p><b><u>INFORMATIONAL ITEMS:</u></b></p>		
<p><b>ENVIRONMENTAL HEALTH REPORT—</b>  In January of 2020 environmental health brought in \$33,130, which is 8,115 more than January 2019, and in February of 2020, environmental health brought in \$38,400, which is 16,025 more than what we brought in in 2019. In March of 2020, environmental health brought in \$33,900 which is 11,813 more than 2019. This is \$36,000 more in the last quarter than in the same time period for 2019.</p> <p>Even through the COVID-19 crisis, our On Site Well Water team has managed to keep the backlog at 2 weeks or less. We have taken steps to implement social distancing during initial inspections and final inspections, and we have only been taking applications via email, and payments with a credit card over the phone. This has worked out well for us and we expect that protocol to continue going forward.</p> <p>We have changed the way we take complaints to keep us out of harm's way and to make us more efficient by asking more questions when complaint calls come in. We are asking if a meth lab is suspected at this location, or if there are safety concerns that we should know about. If the answer is yes, we encourage them to call the sheriff's</p>	<p><b>Jason Master, EH Director</b></p>	



office. We cannot put ourselves in harm's way due to a dispute between neighbors. We will be happy to help after law enforcement takes care of the dispute, but we don't have the teeth to do anything before that.

We are Shifting our focus to repair applications, so that in case people are stuck at home in quarantine, they will at least have a functioning septic system.

COVID-19 response:

- We are continuing to build a new "decentralized" environmental health department from the ground up. Working from home, or at least remotely for a long period of time, is something that we had not seriously considered before, but now we have had the opportunity to explore our options. We are fortunate that we have such an experienced staff, because we realize that with new inspectors, so much is learned from buddying up with seasoned people. We are figuring that part out, but we believe that we have the technology to make it work, we just have to figure out how to maximize that potential.

-We have developed a Continuation of Operation Plan should the need arise for use to become more home-based for longer periods of time and are figuring out exactly what that would look like.

-Just before the beginning of the COVID-19 crisis, our F/L team was maintaining the 100% goal. In the past, in times of crisis or disaster, the state will refer back to the last quarter in determining the percentage that will be used for the current quarter, so I suspect that EH will still be in line for the 100% money.

-We have volunteered the EH offices here in Rutherford to the nurses to help with COVID-19 testing, and we are considering doing something similar in McDowell.

-We have changed the duties of our F/L inspectors for the time being and have made them available to answer questions and do check-ins with local restaurants. They have

<p>also been doing "virtual inspections" which is like a FaceTime call, where the inspectors look at immediate threats and the most "at-risk" factors in retail food establishments. Our role has changed some due to the spread of corona virus, and we are figuring out how to best adapt our rules and regulations while still being effective.</p> <p>-Now that NC has moved into phase 2, we expect face-to-face routine, inspections to resume starting tomorrow with the initial focus on larger, full-service food establishments, and areas that may be subject to larger crowds, like swimming pools. Our inspectors will be wearing their own PPE.</p> <p>-Last time we talked about the district enrolling in the FDA Program Standards, and at that time I had completed 5 of the 9 program standard self-assessments. Since then, I have completed all 9 of those, and have submitted an application for 70K from the FDA, and I am currently searching for an additional grant for about \$15K for scanning software to curate our collection of existing septic system permits.</p>		
<p><b>No items of new business or any other action items.</b></p>	<p><b>Ben Hall, Chairperson</b></p>	
<p><b>NO CLOSED SESSION.</b></p>		
<p><b>ADJOURNMENT:</b> At 7:35 pm, Dr. Jerald DeLaGarza made a motion to adjourn, seconded by Kim Warner. The motion was approved with remote votes from Neil Perry, Greg Lovelace, and Dr. Buchanan, and in person votes by Dr. Hall, Carol Wolfenbarger, Kim Warner and Dr. DeLaGarza. The meeting adjourned at 7:36 pm.</p>		
<p><b>SIGNATURES:</b></p> <p style="text-align: center;">_____</p> <p style="text-align: center;"><b>Karen Powell, Foothills District Health Director</b></p> <p style="text-align: center;">_____</p> <p style="text-align: center;"><b>Dr. Ben Hall, Chair of the Foothills Board of Health</b></p>		