

**Tri-County Board of Health Meeting
December 10, 2013
Minutes**

The Board of Health was officially called to order at 5:03 p.m. by Thomas Fawell, M.D., Board President, at Blackstone Country Club, 7777 S. Country Club Parkway, Aurora, CO 80016. Other members comprising a quorum included Carole Adducci; Joseph Anderson, M.D.; Janice Brainard; Kaia Gallagher, Ph.D.; Rick Hale; Paulette Joswick; Don Parrot; and Naomi Steenson. Dr. John M. Douglas, Jr., Executive Director, and several Tri-County Health Department (TCHD) employees were also in attendance.

Introductions

None.

Current Infectious Disease Events

Dr. Douglas discussed the increase of viral gastroenteritis cases in child care and long-term care facilities, the continuing pertussis epidemic, and provided an update on the shigellosis outbreak in a Northglenn child care center.

Approval of the Minutes of the October 8, 2013 Meeting

The minutes of the October 8, 2013 meeting were presented to the Board for review.

MOTION: Dr. Gallagher moved to approve the minutes of the October 8, 2013 meeting as written and Mr. Parrot seconded. The motion was approved unanimously.

Approval of the Financial Statements Dated September 30, 2013

Mark Harkleroad, Director of Administration and Information Technology, presented the financial statements dated September 30, 2013 to the Board for review. He noted that expenditures were at 72.74 percent of budget with 75 percent of the year complete.

Mr. Parrot inquired on various revenue and expense line items in excess of 150 percent of budget. Mr. Harkleroad referred Mr. Parrot to the comments column of the financial statements and explained that an explanation is included whenever there are significant shortfalls in revenue or overages in expenditures; usually amounts in excess of \$25,000.

MOTION: Ms. Adducci moved to accept the financial statements dated September 30, 2013 as presented and Ms. Joswick seconded. The motion was approved unanimously.

Public Hearing: Adoption of the 2014 Proposed Budget and Appropriation Resolution

Dr. Fawell opened the public hearing for the adoption of TCHD's 2014 proposed budget and appropriation resolution at 5:30 p.m. It was noted that the public hearing was duly advertised in the Legal Notices section of *The Denver Post* on Sunday, November 17, 2013.

Mr. Harkleroad provided a summary of revenue and expenditure changes made since the 2014 draft budget was presented to the Board of Health at the August 13, 2013 meeting. Total projected revenue for 2014 is \$34,135,007. Projected expenditures for 2014 are \$33,139,468 plus a \$995,539 contribution to the assigned funds portion of the fund balance for the facilities master plan project. Total projected expenditures, ending fund balance and in-kind contributions for

2014 equal \$50,997,115.

Mr. Harkleroad explained that in addition to the \$995,539, TCHD planned to withdraw an additional \$1,285,791 from the assigned funds portion of the fund balance for a total of \$2,281,330. This amount would be used for:

- \$1,701,330 – Leasehold improvements and construction costs associated with the replacement of the existing Northglenn facility
- \$191,000 – Information Technology equipment refresh associated with the annual replacement schedule/cycle and planned capital software purchase
- \$389,000 – Furniture and fixture expenses associated with the Northglenn replacement facility and Altura Plaza remodel

Dr. Fawell noted no one from the public was present to speak and closed the public hearing at 5:40 p.m.

Mr. Parrot inquired on the makeup of the \$5.8 million in revenue in the “Fees, Contracts, Grants, Etc.” category. Mr. Harkleroad explained that retail food establishment and Vital Records fees account for the majority of funding in this category.

Dr. Gallagher inquired whether there was a minimum amount that must be kept in the fund balance. Mr. Harkleroad answered affirmatively and reminded the Board that they had passed a resolution last year that redesignated and supplemented the reserve fund balance. This was done in response to a recommendation made by our auditor, Rubin Brown, LLP, pursuant to the requirements of paragraph 20, Governmental Accounting Standards Board (GASB) 54. The resolution also reclassified the 2012 Emergency Operating Reserve fund from Unassigned to Committed pursuant to TCHD’s GASB 54 Fund Balance Policy.

MOTION: Mr. Parrot moved to approve the 2014 Proposed Budget and Appropriation Resolution as presented and Mr. Hale seconded. The motion was approved unanimously.

Approval of the Five-Year Public Health Improvement Plan (PHIP)

Dr. Douglas discussed how impressed he has been with stakeholder involvement, the magnitude of work involved and project response. He thanked Stacy Weinberg, Director of Epidemiology, Planning and Communication; Patty Boyd, Strategic Partnerships Manager; Dr. Jana Smith, Aging Initiatives Manager; and Dr. Allison Hawkes, Planning and Evaluation Program Manager for their hard work.

Ms. Weinberg provided a synopsis of the community-wide planning process with stakeholders that began last fall. Following a community health assessment, a capacity assessment and an analysis of health data indicators, the following three main themes were identified: 1) mental health, 2) obesity and healthy eating/active living, and 3) access to care. Next, two prioritization meetings involving 24 stakeholder organizations resulted in “mental health” being identified as the focus area for our jurisdiction.

The final phase was to develop a five-year Public Health Improvement Plan (PHIP) to improve mental health promotion in Adams, Arapahoe and Douglas Counties. Guided by stakeholder input and aligned with the mental health goals selected by the Colorado Office of Behavioral Health, the PHIP consists of goals and objectives that provide a broad framework within which

TCHD and its partners will develop work plans and implementation strategies aligned with community and partner activities, needs and available resources. The major foci the first year will be assembling a Leadership Team comprised of community partners from a variety of sectors and developing work plans for each PHIP goal. For the duration of the five-year plan, progress and lessons learned will be evaluated annually and the next year's plan will be developed.

Ms. Weinberg stressed that the PHIP is a strategic community approach to address mental health promotion and that the majority of work would be carried out by stakeholder organizations. TCHD's role consists of identifying the players, bringing partners together, and enhancing existing population-level data collection efforts for mental health promotion and mental illness.

Finally, Ms. Weinberg summarized key outputs and short-, medium- and long-term outcomes for each PHIP goal. She explained that long-term outcomes (i.e., ten or more years) cut across all four goals and stressed that we plan to see this work continue beyond the five-year plan by coordinating community partner efforts to assure the integration of mental and physical health at multiple levels.

Dr. Fawell inquired on plan submission. Ms. Weinberg stated that the PHIP must be submitted to CDPHE by December 31, 2013. CDPHE will present the plan to the State Board of Health in February 2014 for approval.

Mr. Hale complemented Stacy and her team on the overall PHIP process, but stated he was concerned that mental health was the only issue on which we chose to focus. He believes mental health is a monumentally complex issue and inquired on the cost to TCHD, how community impact would be measured and our reason for choosing mental health as our focus area. Ms. Weinberg explained that mental health was chosen by our stakeholder group. This issue received two times more votes than obesity/healthy eating/active living and access to care. TCHD's role consists of building partnerships and enhancing population-level data collection efforts; the burden of implementing strategies and identifying community resources rests on the stakeholders. Dr. Douglas explained that he views PHIP as an opportunity to mobilize community partnerships and leverage community resources to address a major issue that contributes to a variety of chronic diseases (e.g., obesity, hypertension, diabetes, etc.). He anticipates approximately three quarters of a full-time equivalent (FTE) will be devoted to this program and assured the Board that TCHD would continue to provide core public health services.

Commissioner Jackson informed the Board that there is currently a huge movement towards integrated health care. She stated it is important to recognize that mental health is tied to physical health. Ms. Joswick pointed out that mental health is also related to obesity and access to care.

Mr. Parrot asked the Board to be aware that CDPHE's Colorado Health Assessment and Planning System (CHAPS) states that focus areas may be chosen by community stakeholders or by the local Board of Health. He stated that business leaders, health insurers and other important community representatives were not involved in the PHIP planning process and believes that the outcome would have been different had they been included. Ms. Boyd explained that she contacted these groups and was informed that they would go along with the outcome. Mr. Parrot stated he could not approve the PHIP because the decision to focus solely on mental health had already been made by the stakeholders. Ms. Weinberg informed the Board that community stakeholders have been equal partners in local health departments' PHIP planning processes statewide and reminded them that our Board members and TCHD staff had been included in that process.

MOTION: Ms. Joswick moved to approve TCHD's Public Health Improvement Plan as presented and Ms. Adducci seconded. All Board members were in favor of the motion except Mr. Hale and Mr. Parrot who were opposed.

Report From the Board of Health Nominating Committee

On behalf of the Board of Health Nominating Committee, Dr. Gallagher recommended that the current slate of Board officers continue in their roles for a third term: Thomas Fawell, M.D., President; Paulette Joswick, Vice President; and Carole Adducci, Secretary.

MOTION: Ms. Joswick moved to accept the proposed slate of officers and Mr. Parrot seconded. The motion was approved unanimously.

Set the 2014 Board of Health Meeting Schedule

The Board members reviewed the following proposed meeting schedule for 2014:

- Tuesday, February 11, 2014 at 4:30 p.m.
- Tuesday, April 8, 2014 at 4:30 p.m.
- Tuesday, June 10, 2014 at 5:00 p.m. (Public Health Hero reception at 4:00 p.m.)
- Tuesday, August 12, 2014 at 4:30 p.m.
- Tuesday, October 14, 2014 at 4:30 p.m.
- Tuesday, December 9, 2014 at 5:00 p.m. (annual dinner meeting)

MOTION: Mr. Parrot moved to accept the proposed 2014 meeting schedule and Dr. Gallagher seconded. The motion was approved unanimously.

Bi-Monthly Division Challenge: Food Service Fees

Brian Hlavacek, Acting Director of Environmental Health, discussed funding challenges associated with the Retail Food Program, which covers many aspects of food protection: inspections (e.g., restaurants, temporary food events and mobile food vendors), plan reviews, food safety training and enforcement. Currently, the Colorado Department of Public Health and Environment (CDPHE) and many local health departments are working towards implementing the U.S. Food and Drug Administration (FDA) Voluntary National Retail Food Regulatory Program Standards. These Standards provide a foundation and system upon which regulatory programs can build through a continuous improvement process while increasing uniformity and efficiency. The standards apply to the operation and management of a retail food regulatory program that is focused on reducing risk factors known to cause or contribute to foodborne illness while promoting active managerial control. The Standards also institute a baseline of 150 establishments per full-time equivalent (FTE) with 280 to 320 inspections per FTE per year. To achieve this baseline, 39 additional FTEs (\$2.9 million) are needed statewide. For TCHD, eight additional FTE at a cost of \$600,000 annually are needed.

Statewide, the Retail Food Program is funded by a combination of general fund dollars and fees set by statute which equate to approximately 50% industry/50% general fund. Additional fees are needed to close the funding gap and to run the program more effectively through routine inspections, food safety education, investigation of foodborne illness complaints, statewide data standardization, and enforcement. The most recent fee increase occurred in 2009; a 64% increase

over fees previously set in 2003.

Colorado state and local health officials are now seeking a 50% fee increase while keeping the general fund contribution level. The proposed increase would raise the annual \$255 license fee to approximately \$380 for most facilities and would result in a 60% industry/40% general fund share across many communities. Colorado state and local health departments, via the Colorado Association of Local Public Health Officials (CALPHO), are working with Colorado Counties, Inc. (CCI) and the Colorado Restaurant Association (CRA) on a bill for the 2014 legislative session.

Dr. Gallagher inquired why the number of annual inspections exceeds the number of retail food establishments in TCHD's jurisdiction. Mr. Hlavacek explained that many establishments are inspected more than once per year and that inspection frequency is based on risk. For example, a facility selling only prepackaged foods is far less likely to be a source of foodborne illness than a full-scale food service operation. A fee increase would enable us to have a much greater presence in retail food establishments

Mr. Parrot asked whether legislative fee setting is typical in the United States. Tom Butts, Acting Deputy Director, stated that it varies across states and across programs. In Colorado, the legislature sets retail food establishment fees and caps septic fees while the local Board of Health sets others.

Ms. Brainard inquired whether the proposed retail food program fee increase would affect one-time events or farmers' markets. Mr. Butts stated that these types of events would not be affected in the bill's current form.

Executive Director's Report

Shigellosis Outbreak at a Northglenn Child Care Center

TCHD is currently responding to an outbreak of *Shigella sonnei* at a child care center in Northglenn (Adams County). To date, ten culture-confirmed and 32 probable cases have been identified with the last case occurring December 5, 2013. No hospitalizations and no deaths have been reported.

BioSense 2.0 Update

In 2012, TCHD and Denver Public Health were jointly awarded a BioSense 2.0 grant from the Centers for Disease Control and Prevention (CDC). The BioSense program is a public health surveillance system that increases the ability of health officials at local, state, and national levels to efficiently, rapidly and collaboratively monitor and respond to harmful health effects of disease or hazardous conditions and provides a mechanism to collect and share information on emergency department visits, hospitalizations, and other health-related data from multiple sources. TCHD has worked closely with DPH to establish greater collaboration with local hospitals and has begun signing data use agreements with them. As BioSense 2.0 moves forward, we will establish a platform for early outbreak detection and routine analysis of syndromic surveillance data.

2013 Health and Medical Evacuation Seminar

In November 2013, the Metropolitan Medical Response System (MMRS) hosted a statewide Evacuation Seminar to provide information, tools and resources to home health care, long-term care facilities and hospitals on large-scale evacuation response. TCHD Emergency Preparedness and Response staff served on the core planning team and presented on a variety of topics.

TCHD All-Staff Meeting Recap

The annual Tri-County Health Department All-Staff meeting was held October 9, 2013 at the Summit Conference and Event Center in Aurora, Colorado. Tom Butts, Interim Public Health Officer, discussed 2013 agency successes, core values, our Public Health Improvement Plan, and a variety of other subjects. Dr. Tom Fawell, Board President, thanked staff for their hard work and introduced Dr. John Douglas, TCHD's new Executive Director, who greeted staff and expressed his enthusiasm about joining Colorado's largest local health department. Deb Center, a motivational speaker, discussed improving relationships by increasing self-awareness, practicing empathetic listening, speaking clearly and compassionately, and learning how to give and accept acknowledgement/gratitude. Service Awards were presented to employees celebrating five, ten, 15, 20, and 25 years with TCHD and Summit Awards were presented to ten employees for outstanding accomplishments this past year.

Household Chemical Roundup Events Summary

Adams County Household Chemical Roundup and Electronics Recycling Drop-off Events were held May 4, 2013 at Water World in Federal Heights and September 21, 2013 at the Thornton Infrastructure Maintenance Center. Approximately 891 community members dropped off 121,236 pounds of household chemical waste such as pesticides, solvents, mercury, etc.

Douglas County Household Chemical Roundup Events were held June 16, 2012 at the Parker Joint Services Center, August 10, 2013 at Shea Stadium in Highlands Ranch and September 7, 2013 at Town of Castle Rock Utilities. Approximately 3,077 community members dropped off 370,375 pounds of household chemical waste such as pesticides, solvents, mercury, etc.

Produce and Health Fairs Update

The 2013 Produce and Health Fairs, held in June, July and August, successfully increased residents' access to healthy foods. This is a joint partnership with Food Bank of the Rockies, Jefferson County Health Department and Cooking Matters. This year 46,335 pounds of healthy food were distributed to 1,413 households.

WIC Gardens Update

The Women, Infants and Children (WIC) Community Gardens provide access to fresh produce, engage families in physical activity and afford an opportunity for nutrition education. Harvested produce is given directly to families who worked in the garden that day. Excess produce is brought back to WIC clinics and distributed to clients and/or donated to local food pantries. This year, 218 families (1,182 individuals) worked in the gardens and harvested 5,439 pounds of produce.

Mile High Connects Symposium

On November 20, 2013, TCHD staff participated in a symposium entitled, "Last Mile Connections to Transit," which focused on providing access to safe, equitable and convenient connections to public transportation for employers located along existing and proposed light rail stations. The symposium provided TCHD staff the opportunity to network with community partners and educate them about the link between transit access and public health outcomes.

Other Items

Colorado Association of Local Boards of Health (CALBOH)

Mr. Parrot announced that it was time to appoint a Board representative to CALBOH. Ms. Adducci, Ms. Steenson, Ms. Brainard and Dr. Gallagher questioned the value of CALBOH membership. Mr. Parrot stated that CALBOH is considering implementing monthly or bimonthly electronic meetings and starting a blog on LinkedIn to increase participation. He stated that he would like to renew Board membership for another year.

MOTION: Dr. Gallagher moved to renew the Board's annual CALBOH membership and to have Mr. Parrot continue as the Board's representative to CALBOH. Mr. Hale seconded and the motion was approved unanimously.

Legislative Gatherings

Dr. Douglas reminded Board members that TCHD would be hosting two sessions with elected officials in TCHD's jurisdiction to discuss relevant public health priorities. These sessions are scheduled from 2:30 to 4:00 p.m. on Monday, December 16, 2013 at TCHD's Commerce City Office and on Thursday, December 19, 2016 at TCHD's Administrative Office in Greenwood Village. He invited Board of Health members to attend. Mr. Parrot recommended TCHD also invite City Managers to these sessions.

Northglenn Office

Mr. Butts discussed the decision to relocate TCHD's Northglenn Office to a "build to suit" site, the cost to do so and the terms of the lease. Projected completion is targeted for February 28, 2015. Project cost will be withdrawn from the assigned funds portion of TCHD's fund balance as specified in TCHD's 2014 Budget Appropriation Resolution, which was approved by the Board earlier in the meeting (see page two).

Marijuana Update

Mr. Parrot noted that recreational marijuana use would become legal in Colorado on January 1, 2014. He requested information at the February 11, 2014 Board meeting on public health issues arising from marijuana legalization and TCHD's potential role.

Ms. Joswick stated that some parents have relocated to Colorado specifically so their children can have access to cannabis oil for certain medical conditions.

Electronic Cigarettes

Ms. Adducci inquired whether electronic cigarettes have been an issue in the school setting. Ms. Boyd stated that many schools have revised their policies to disallow the use of electronic cigarettes on campus; however, they have been a problem in the workplace.

Set Agenda for the February 11, 2014 Meeting

The February 11, 2014 agenda will include an update on public health issues arising from marijuana legalization and TCHD's potential role.

Board Member Remarks

None.

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Closing Remarks

None.

Adjournment

MOTION: Ms. Adducci moved to adjourn the meeting at 6:41 p.m. Ms. Joswick seconded and the motion was approved unanimously.

Thomas Fawell, M.D., President

Carole Adducci, Secretary