

Harnett County Board of Health  
Minutes of Regular Meeting  
May 21, 2020

The Harnett County Board of Health met in regular session on Thursday, May 21, 2020 in the Health Department Board Room, Harnett County Governmental Complex, 307 W. Cornelius Harnett Blvd., Lillington, North Carolina. A virtual Board of Health meeting using audio conference call was held for the May 21, 2020 meeting. Due to COVID-19 the Board of Health meeting was not open to members of the public to attend in person however, citizens were provided options to listen to the meeting. Only Public Health staff necessary to conduct the meeting or to speak on scheduled agenda items were in attendance. As the Board demonstrated compliance with State law and prudent public health practices.

**Members present by conference call:** Ms. Amy Allen, RN, Vice-Chairwoman, Ms. Linda Sturdivant, Ms. Gayle Adams, Dr. Amanda Langdon, DVM, Dr. Kim Fowler, PhD, Ms. Stacie Hogan, RPH, Ms. Barbara McKoy and Dr. Catherine Evans, DDS.

**Members present:** Dr. Laura Smith, Chairwoman and Mr. John Rouse, Jr., Health Director.

**Others present:** Mary Jane Sauls, Oliver Tolksdorf, Debra Harris-Hawkins, Melissa McLamb, Gail Hobbs, and Natasha Johnson.

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**Chairwoman Smith** called meeting to order at 7:00 p.m.

**Announcements** – Mr. Rouse reported Emily Barefoot and Donna Surles are not present tonight due to medical reasons.

**Consent Agenda – Minutes – Motion made by Dr. Catherine Evans, DDS for the March 5, 2020 minutes to be approved as presented and seconded by Ms. Amy Allen, RN. Motion Carried.**

**Consider additions and deletions to the published agenda – None made.**

**Public Comment – Period of up to 30 minutes for informal comments allowing 3 minutes for each presentation – Chairwoman Smith** opened the floor for informal comments by the public, allowing 3 minutes for each presentation up to 30 minutes. Citizens were allowed to call in and provide their public comments verbally during this period. No one called in and no public comments were received. Chairwoman Smith closed the informal comments.

**Health Disparities Report** – Debra Harris-Hawkins presented a power point presentation for the annual Health Disparities report. The report provides information and data regarding the Health Department's programs and services utilized by the following priority populations, uninsured, children, and women, underserved, at-risk and vulnerable populations. Health disparities are differences in health outcomes and their causes among groups of people. Reducing health disparities is a major goal of public health. Programmatic data was reviewed, for the clinical services, Women Infants and Children (WIC), mammography screening program and community outreach initiatives the timeline for the report included January-December 2019. Clinical programs for 2019, there were fewer persons seen in the clinics. Approximately 7,704 clinical visits were recorded with 30% of those person identified as uninsured. By gender, the number of women seen is almost twice as the number of males with 5,083 verses 2,621 respectively. By race, 5,131 persons identified as White compared to 2,263 identified as African American. Approximately 35% of the persons seen relied on Medicaid to cover medical costs. In our most recent Community Health Assessment (CHA) 18% of county residents, live in poverty. WIC is a special supplemental nutrition program. The priority population includes low-income pregnant, breastfeeding, non-breastfeeding postpartum women, infants and children up to age five who are found to be at nutritional risk. To qualify for WIC your household income must be at or below 185% of the federal poverty income level. Over 32,000 participants were seen in 2019, which averages approximately 2,667 participants each month, approximately 1,361 are children. This program has three sites in the county, Dunn, Lillington and Anderson Creek to provide access to services close to where people reside. The Health Department's collaboration with Rex Mobile Mammography which provides access for uninsured women to mammography screening, this was cited as an example of how the Health Department is working to implement programs and services for the priority populations to assure needs are being met. Approximately 210 women were seen in 2019 with over 52% identified an uninsured. The Health Department's outreach efforts to reach vulnerable population, our faith based initiatives include collaborations with approximately 18 churches in 2019. Staff have worked to extend access to resources and screenings for community groups, during non-traditional hours. An example is the community human immunodeficiency virus (HIV) testing program, screening over 200 person in 2019 by providing community based testing. We work to educate individuals and the community about health and available public health services. This is an overview of a few of the programs and services we hope it provides insight as to how we are working to improve health outcomes and address health disparities.

**Clinical Patient Fees, Eligibility and Bad Debt-Write Off Policy Revision** - Gail Hobbs stated the changes to the Clinical Patient Fees, Eligibility and Bad Debt-Write Off Policy. The changes were made due to the recommendations from State auditors.

**Motion by Ms. Barbara McKoy to approve the changes to the clinical fee policy as presented and seconded by Ms. Gayle Adams. Motion Carried.**

**Debt Setoff** – Gail Hobbs reported the total amount of Debt Setoff money received this calendar year is \$5,641.29 in debt setoff funds.

CPT CODE	DESCRIPTION	OLD RATE	RECOMMENDED PRICE
<b>IMMUNIZATIONS</b>			
90632	Hepatitis A-Adult	\$45	\$65
90636	Twinrix (Hep A & Hep B)	\$95	\$122
90647	HIB (Pedvax)	\$25	\$29
90670	Prevna (Pneumonia)	\$210	\$235
90675	Imovax (Rabies)	\$300	\$393
90680	Rotateq (Rotavirus)	\$79	\$95
90681	Rotarix (Rotavirus)	\$116	\$140
90698	Pentacel (dTap, IPV, HIB)	\$88	\$101
90707	MMR(Measles,Mumps, Rubella)	\$75	\$87
90713	IPV (Polio)	\$30	\$35
90715	Tdap (Adacel/Boostrix)	\$40	\$48
90723	Pediatric (dTap, IPV, Hep B)	\$75	\$90
90732	Pneumovax23(Pneumonia)	\$105	\$119
90734	Menactra (Meningitis)	\$135	\$152
90739	Hep B Adult Vaccine (NEW)	\$0	\$97
90746	Hep B 19+ (Engerix)	\$60	\$69
90710	Proquad(Measles,Mumps,Rubella,Varicella)	\$225	\$232
90716	Varicella (Chicken Pox)	\$133	\$145

**LAB**

83655	Lead	\$16	\$18
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**\*Rate increases for above CPT Codes based on reimbursement rates from Medicaid as well as price increases from vendors.**

**SERVICES**

J7296	Kyleena 5-Year IUD (NEW)	\$0	\$900 (340b price \$249)
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T1001*	Nursing Assess/Evaluation	\$88	\$101
T1002*	RN Services up to 15 minutes	\$19.50	\$21

**\*Rate increase due to 5% increase for services reimbursement from Medicaid. To be adjusted to former fees after COVID 19 pandemic is concluded**

**Motion to approve the increased fees and to add new fees from Dr. Amanda Langdon, DVM and seconded by Ms. Amy Allen, RN. Motion Carried.**

#### **Health Director's Report and Program Reports – Mr. John Rouse**

- **Updates** – Mr. Rouse announced the most recent total of COVID-19 cases in Harnett County, with 251 confirmed cases and 20 deaths. The state website currently shows Harnett County with 257 confirmed cases, however that information has not been updated and the difference in numbers is a result of confirmed cases that were not Harnett County residents. Case numbers increased in the month of April 2020, however the past 10 days the numbers have stabilized. Mr. Rouse reviewed confirmed case numbers by increase/decrease on a timeline since March 2020, also cases confirmed by age/gender and death cases by age/gender. Harnett County continues to do contact tracing of COVID-19 cases; Fort Bragg has offered to conduct contact tracing on Harnett County cases that are connected to them. Mr. Rouse discussed the state and federal supplies of Personal Protective Equipment (PPE) that facilities are starting to receive and the available areas that are beginning to do antibody and antigen testing. Mr. Rouse reviewed the average amount of time before a vaccine would be available and the availability being prioritized for the elderly and immunocompromised.
- **Strategic Plan** – Mr. Rouse related the Health Department's Strategic Plan has temporarily been postponed due to COVID-19. Mr. Rouse also discussed the Accreditation Board has decided to give a one year extension and exempt year 2020 due to COVID-19.
- **Financial Reports** – Mr. Rouse reviewed the Expenditure Summary from July 2019 – March 2020 and Revenue Summary from July 2019 – March 2020. Revenues within our programs in the Health Department are coming in as they are supposed to up until March 2020. Revenues have decreased an average of 20% starting in April 2020 due to COVID-19. Environmental Health revenues

have decreased in April 2020 mainly due to the weather and swimming pool permits have been put on hold due to COVID-19, but revenues have started to increase as of May 2020. Mr. Rouse reported the Employee Clinic saved the county \$75,616.00 in the third quarter and continues to be an active clinic among county employees. The budget proposal for FY 2020-2021 has been presented to the county.

#### **Clinical Reports – Melissa McLamb**

- **Child Health and Employee Health Clinics** have decreased during the COVID-19 outbreak. The American Pediatric Association recommended that well exams be postponed if possible to decrease the risk of exposure to COVID-19 illness. The clinics have tested several children for COVID-19 and continue to provide primary care services for sick children however, newborn home visits have been on hold due to COVID-19.
- **Immunization** program did well on their annual review, meeting the 2019-2020 Health Department goal of 90%. This means that 90% of children age 24 months through 35 months that receive vaccines at the Health Department were up to date on their immunizations. We did not meet the countywide up to date goal for that age range. Our goal was 66% and our percentage meeting benchmark was 57%. This is mostly due to having a large number of military families whose vaccines are not completely reported in the state registry. Our Immunization Coordinator and all staff do a great job at reaching out to children, daycares, other county providers and families regarding vaccines.
- **Flu Reports** are received from the State Communicable Disease (CD) Branch showed no positive flu cases across the state this past week. There have been 187 flu deaths in North Carolina this season (September 29, 2019 to present) with 105 of those being adults 65 years and older.
- **Family Planning and Maternal Health Clinics** recently completed their 3-year Women's Health program review that went well. Our Family Planning and Maternal Health clinics continue to screen and see patients during the COVID-19 outbreak. Postpartum home visits have been on hold due to COVID-19.
- **Communicable Disease** staff continues to work COVID-19 investigations and contact tracing. The increase in cases has mainly been associated with long-term care facility outbreaks as well as poultry plants in neighboring counties.

The Health Department is in frequent contact with the State CD Branch and they are available to us for any questions or concerns. We keep our staff informed and up to date on the latest information that we receive. Staff meets bi-weekly with community partners to discuss county COVID-19 updates as well as guideline changes from the State and Centers for Disease Control and Prevention (CDC).

- **Preparedness** Epidemiology Team (EpiTeam) are keeping up with the COVID-19 outbreak. They have also been working with OnTarget Preparedness to plan and prepare for our full-scale tabletop exercise however, this event has been postponed due to the COVID-19 pandemic. More to come on this as we move forward.
- **Environmental Health** Oliver Tolksdorf discussed onsite wastewater numbers have been steady since March 2020 and the COVID-19 pandemic has not affected the workload. Food & Lodging inspections are following the guidance presented from the State during the closure of restaurants. The frequency of inspections has decreased but the amount of educational visits and information has increased. The required inspections currently fluctuates and the staff will continue to work under the guidance from the State.
- **Aging & Case Management** – Mary Jane Sauls reported Harnett County Retired Senior Volunteer Program (RSVP) cancelled the April 9, 2020 Volunteer Appreciation Lunch due to the COVID-19 pandemic. In lieu of a recognition event, gift certificates were purchased for all 219 RSVP volunteers for all of their hard work and dedication. The 26<sup>th</sup> Annual RSVP Senior Fair scheduled for May 7, 2020 at the Dunn Community Center was rescheduled for May 28, 2020 and was later cancelled due to current circumstances. During COVID-19 volunteer sites such as hospitals, libraries, senior centers, thrift stores, museums, schools, churches, courthouses and civic organizations are closed to the public. RSVP volunteers that feel comfortable, have been serving in non-traditional ways. Examples of this include, well check calls to family members, church members, neighbors and fellow volunteers. These friendly calls have helped people feel less isolated and lonely during the stay at home order. Volunteers are running errands for people who cannot leave their homes for groceries, medication and supplies. Volunteers are also making facemasks for healthcare workers, friends and relatives. Grandparents Raising Grandchildren and Caregiver Support programs have been meeting via teleconferencing. The facilitator continues to meet the needs of the participants during this time.

All contact with Alternatives Program for Disabled Adults (CAP/DA) beneficiaries and caregivers is conducted via phone. Case Managers are required to ask the beneficiary about any COVID-19 related symptoms they may be experiencing. In addition, each beneficiary has been provided a symptom management log to be completed daily by the beneficiary, live-in caregiver and In-Home Aide provider. They are asked to take their temperature and report if they have a cough, sore throat, shortness of breath or known exposure to COVID-19. Any symptoms are reported to their medical provider. The elderly nutrition congregate sites will remain closed until June 30, 2020, and will be reevaluated at that time. We continue to provide a combination of frozen meals, hot meals and shelf meals through the nine home delivered sites in the county. With the help of many volunteers, we continue to serve over 1,050 meals a month.

- **Marketing/Community Outreach** – Debra Harris-Hawkins announced the Health Department collaborated with Harnett County Schools “Grab and Go” to distributed 1,067 bags containing health information, which included COVID-19 information and resources at the Boys & Girls Club in Lillington, Boone Trail Elementary, Coats Elementary, Lillington Shawtown Elementary, and Angier Elementary. Rex Mobile Mammography will be onsite June 2, 2020 and June 9, 2020 providing mammography screenings. Due to COVID-19, changes in the screenings have been put in place to help prevent the spread of COVID-19.

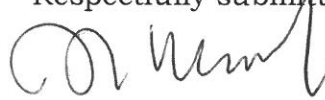
**Closed Session** – There was no need for closed session.

**New Business – Chairwoman Smith** opened the floor for New Business. Being none Chairwoman Smith closed New Business.

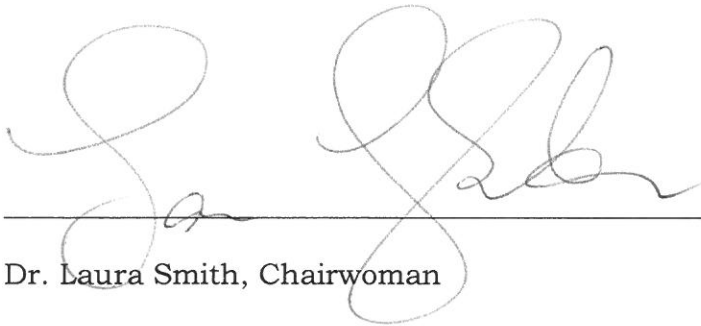
**Chairwoman Smith adjourned the meeting.**

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Board of Health  
May 21, 2020  
Harnett County Health Department Board Room

Respectfully submitted,

A handwritten signature in black ink, appearing to read "John Rouse, Jr.", written in a cursive style.

John Rouse, Jr.  
Health Director

A handwritten signature in black ink, appearing to read "Laura Smith", written in a cursive style. The signature is positioned above a horizontal line.

Dr. Laura Smith, Chairwoman