Beaufort County Health Department
Board of Health

March 15, 2022 Meeting

☒ Regular Meeting ☐ Special Meeting

1) Call to Order:
The Beaufort County Board of Health (BOH) meeting was called to order at 6:00 pm by Chair, Chris Padgett.

Members Present:
- Chris Padgett, OD and Chair
- Marty Poffenberger, DVM
- Robert Belcher, Member-at-large
- Jessica Triche, MD, Physician
- Stewart Ham, Member-at-large
- Hood Richardson, County Commissioner
- David Howdy, DDS
- Shelia Slade, RN
- Mark Roy, Engineer
- Joe Hooker, Member-at-large

Members Absent:
- Angela Biggs, PharmD

Quorum present

Staff present:
- James Madson, Health Director
- Sara Graham, Business Officer
- Stacey Harris, Environmental Health Supervisor

Visitors:
- Gerald Seighman

2) Public Comment:
Gerald Seighman provided public comment. Mr. Seighman stated that it is interesting with political elections coming soon, that cities and states are doing away with restrictions. It was also interesting that at the State of the Union, politicians didn't stay apart.

3) Old Business:

Approval of January 18, 2022 meeting minutes:

Chris Padgett asked for a motion to approve the minutes from the January 18, 2022 meeting. Motion made by Jessica Triche to approve the minutes as written. David Howdy provided a second to the motion which passed with all in favor.

4) Closed Session:

Robert Belcher made a motion to go into closed session to discuss the performance of the Health Director (G.S. 143-381.11 (a) (6)). Shelia Slade provided a second to the motion which passed with all in favor. The annual evaluation for the Health Director was completed. The job description for the Health Director was reviewed and approved. No board action was taken. David Howdy made the motion to end the closed session and resume the Board of Health meeting. Mark Roy seconded the motion with all in favor.

5) New Business:

FY 2022-2023 Consolidated Agreement:

Mr. Madson presented the Consolidated Agreement (contract between the health department, Division of Public Health, and the NC Division of Child and Family Well-Being). It outlines requirements for the agencies and applies to all activities funded by DHHS. This has to be approved annually by the Board of Health and the County Commissioners. The list of changes and a copy of the Consolidated Agreement was sent to all Board members on March 7, 2022.

Hood Richardson asked what the major changes were, and Mr. Madson reviewed the list of changes (Attachment A). Hood Richardson asked what populations are served by the care management programs. Mr. Madson responded that those programs serve the Medicaid population. Hood Richardson's follow up question to Mr. Madson was would the state find another provider if we did not provide the service. Mr. Madson stated the PHPs would find another agency to provide.

Hood Richardson asked what the consequences are of not signing the Consolidated Agreement. Mr. Madson responded that the health department would not be able to draw down state funding. Hood Richardson also asked if there are any health departments that do not sign, and Mr. Madson replied that all local health department's sign the Consolidated Agreement.

Motion made by Jessica Triche to accept the Consolidated Agreement and changes as written. David Howdy provided a second to the motion which passed with all in favor.

FY 2022-2023 Proposed Budget (Slide 6):

Mr. Madson presented the FY 2022-2023 proposed health department budget. Board members received copies of the budget in the packet or via email for review

prior to the meeting. Mr. Madson and Sara Graham will meet with the County Manager and Finance Officer in April to review the budget.

The requested continuation budget is $4,975,864. The total budget request is $602,160 less than the current year amended budget. The proposed county allocation is $15,149 less than the FY 22 amended budget and $8,778 less than the approved budget. Mr. Madson stated the increase in health insurance costs has been absorbed by additional funding for communicable disease, the MAT grant, and additional WIC funding. County allocation is approximately 40% of the FY23 proposed budget.

Mr. Madson stated we are still waiting on the Rural Health Grant award and should receive the decision in mid-April. Dr. Padgett asked how much the grant will be and Mr. Madson stated an additional $75,000 in revenue.

Mr. Madson stated the proposed budget does not include any cost-of-living adjustments for staff. Robert Belcher stated a COLA is needed to not lose employees. Mr. Madson said the CPI is currently 7% and any COLA would have to be at the county level.

Mr. Madson said there are no changes to the fee schedule.

David Howdy made a motion to accept the proposed FY 2022-2023 budget and fee schedule. Stewart Ham seconded the motion. Motion passed with all in favor.

Budget Amendments:

Mr. Madson requested Board approval for the following budget amendments:

- $117,600 ARPA COVID-19 School Health
- $8,559 Women, Infants, and Children Funding

A motion was made by Jessica Triche to accept the budget amendments as presented and a second to the motion was provided by Robert Belcher. The motion passed with all in favor and none opposed.

6) <u>Communicable Disease and Trends:</u>

Mr. Madson provided updated information for COVID-19 (Slides attached). Information reviewed and discussed included:

- Beaufort County Statistics as of 3/15/22
  - 76,421 tests conducted on Beaufort County residents to date
  - 12,759 positive tests
  - 453 hospitalizations
  - 157 deaths; average age of death 74.7
  - 282 active cases

- Beaufort County 7-day average case counts as of 3/15/22

Mr. Madson provided information to the Board on where we are heading with COVID-19 (slide 11). Highlights include:

- Trends decreasing
- Masks mandates lifting
- Declining demand for testing
- At-home test kits available
- Updates to Case Investigation and Contact Tracing (slide 13)
- Vaccine Operations
    - Low demand, moving towards regular clinic appointments
- Public Education
- Surveillance
- Reports and Updates

Hood Richardson read the following statement:
"Now that the COVID-19 issue is leaving the political screen and its medical effects are becoming clear, the seizing of medical power and authority by our politicians should never be allowed to happen again. Adequate, comprehensive and effective methods including quarantine laws have been developed throughout human history to protect public health without allowing politicians such dictatorial authority. The practice of political medicine by false prophets including Dr. Anthony Fauci should never again be tolerated by a free people."

Jessica Triche responded that Dr. Fauci did a phenomenal job and handled the situation well overall. Science and medicine will change. Stewart Ham said he totally agreed with her.

7) <u>Financial Reports:</u>
Two financial reports for FY 2022 (as of 02/28/22) were shared and discussed with the Board:
    1. Budget $5,675,230. Expenditures 55% to budget ($3,123,943.59)
    2. Revenue
        a. State 48.4% to budget ($997,305.60)
        b. Medicaid 50.6% to budget (339,95.15)
        c. Fees/Insurance/Grants 94.8% to budget ($858,424.43)

8) <u>Health Director's update:</u>
2022 Community Health Assessment
Mr. Madson stated we have received an extension on the Community Health Assessment and the deadline is now June.

Community Engagement

Mr. Madson shared approximately 25 individuals completed the Community Health Worker training at Beaufort Community College.

Healthy Beginnings

Mr. Madson stated that the grant for Healthy Beginnings has been awarded for the next 3 years.

MAT

Mr. Madson informed the Board that BCHD is moving forward with implementing the MAT "Medication Assisted Treatment" program in the detention center to reduce opioid abuse.

Employee Health

Employee Health Clinic started March 1st

9) Adjournment of meeting:

The meeting adjourned at 7:06 pm with Joe Hooker motioning for the meeting to be adjourned and Jessica Triche providing the second to the motion. The motion passed with all in favor. The next meeting is scheduled for May 17, 2022 at 6:00pm.

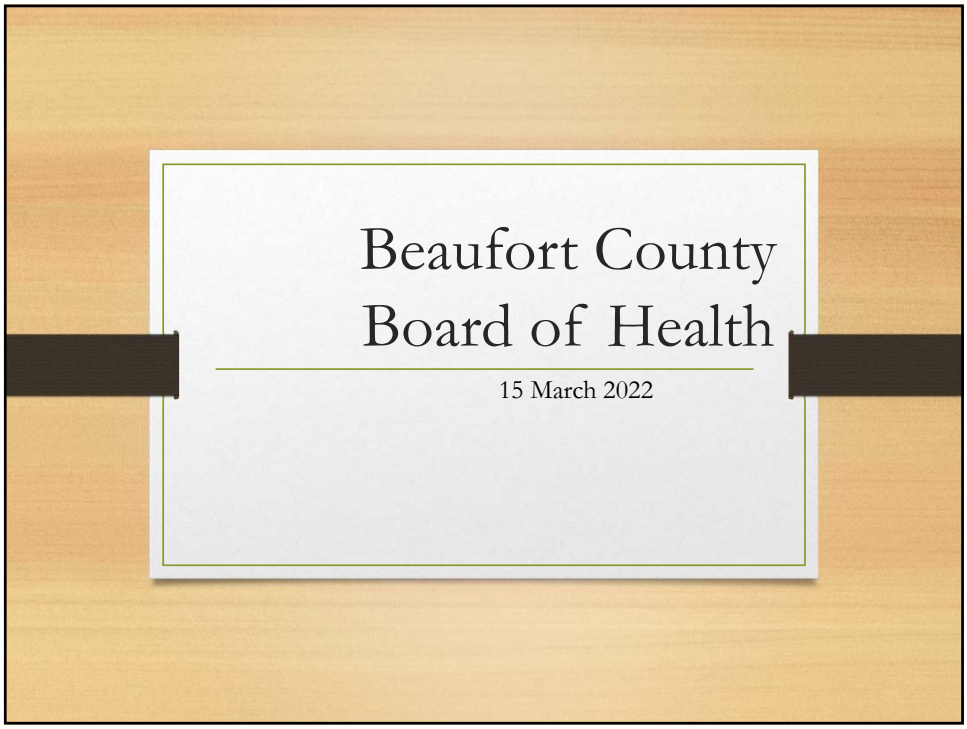
Minutes recorded by:

Sara Graham

Sara Graham, Business Officer
Beaufort County Health Department

Minutes approved by the Board of Health on May 17, 2022:

Chris Padgett, OD
Board of Health Chair


Beaufort County
Board of Health
15 March 2022

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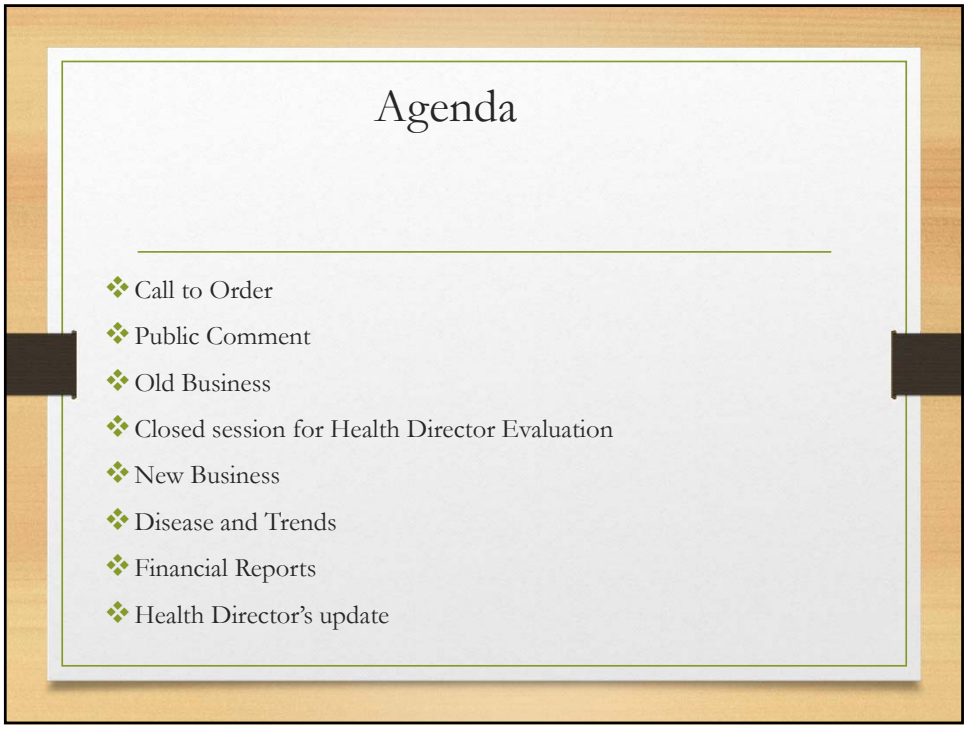
Agenda
Call to Order
Public Comment
Old Business
Closed session for Health Director Evaluation
New Business
Disease and Trends
Financial Reports
Health Director's update

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Old Business

- Minutes from January 18, 2022 meeting

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Closed Session

- Health Director Evaluation

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New Business

- Consolidated Agreement
- 2022-2023 Budget Proposal (No changes to the Fee schedule)
- 2021-2022 Budget Amendments

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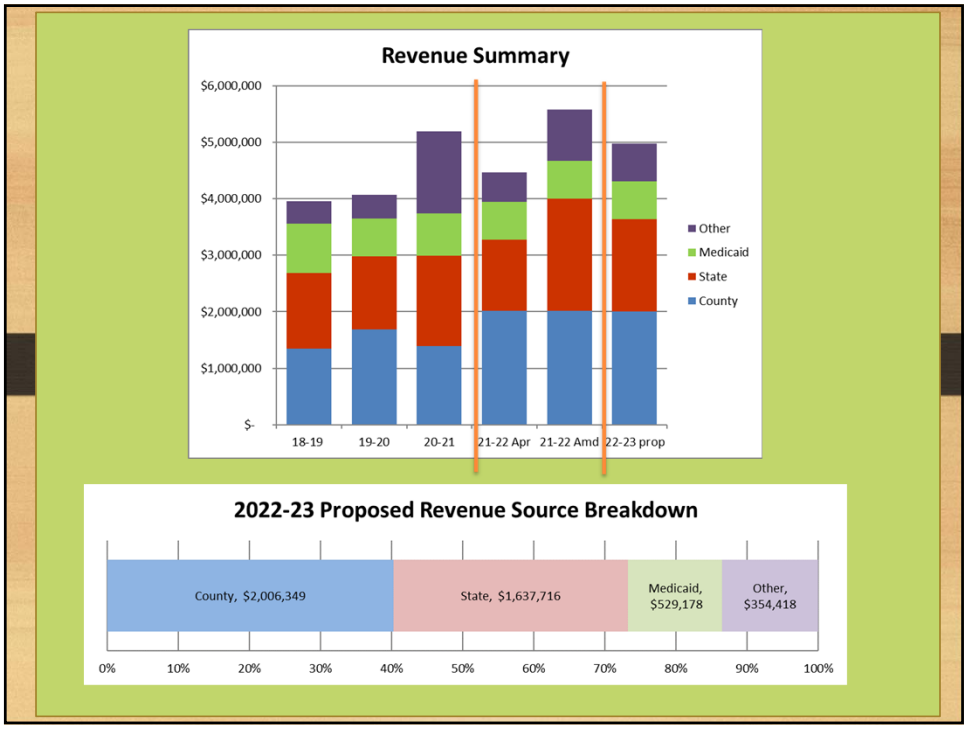

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Budget Amendments
FY 22

Budget amendments submitted at the March BOCC meeting:

- $117,600
  - *ARPA COVID-19 School Health*
- $8,559
  - *Women, Infants, and Children (WIC) Funding*

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Communicable Disease and Trends

- COVID-19 Update

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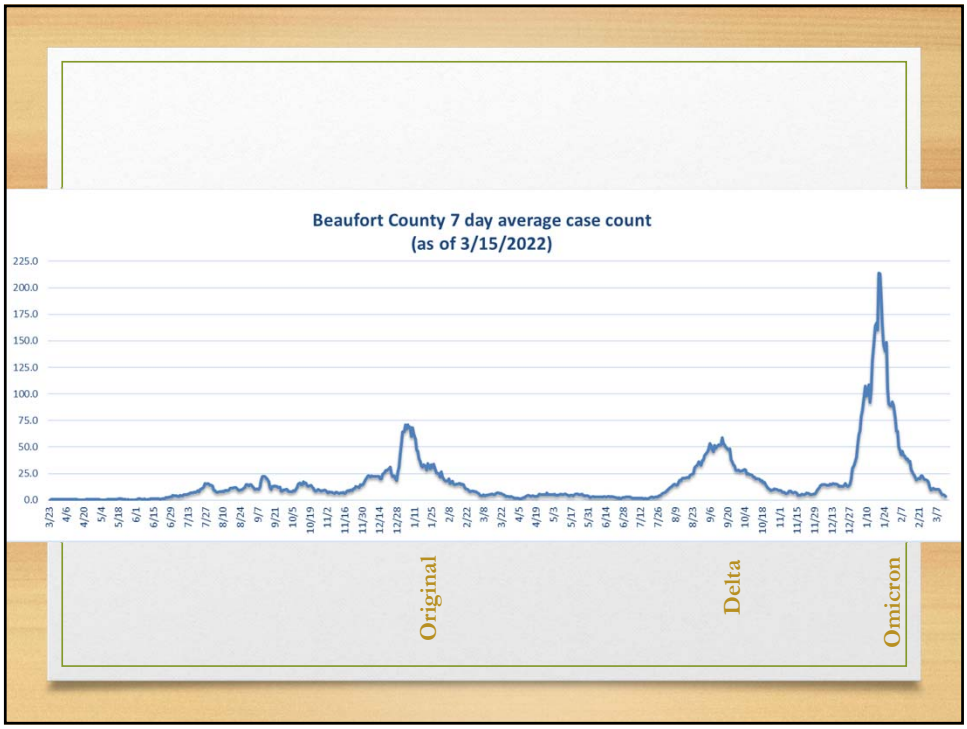

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Tuesday, March 15, 2022		
Tests conducted on Beaufort county residents (to date)	76,421	
Total cases (tested positive)	12,759	
Total hospitalizations that have occurred	453	3.6%
Total Deaths*	157	1.2%
Average age of deaths (years)	74.7	
Known active cases currently in the county	282	
Currently hospitalized	1	0.4%
Currently on a ventilator	-	
Total cases recovered	12,320	96.6%
Seven (7) day average case rate	**3.6**	
Positive cases June 1 to Dec 31 (2021)**	3,447	
Breakthrough (positive after completing vaccination)**	663	19%
Positive cases since Jan 1, 2022 (Omicron influence)***	4,648	
Breakthrough (this data lags behind case count)	1,951	42%
Deaths* from long term care facilities	59	38%

*Deaths reported through this website have been confirmed through a review of the death certificates. This validation process can sometimes take a long time when a resident passes in another County or State. Other sources may report presumptive totals and therefore will vary with those reported here.

**June 1, 2021 is used as a starting point due to first breakthrough case and start of Delta Variant detected in area.

***This period is used to determine influence of Omicron Variant on County

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Where we are heading

- Trends are decreasing
- Vaccines and boosters are widely available and help protect against severe illness, hospitalization, and death
- Treatment is available for those at higher risk of severe disease
- Much of public has immunity
- Variants have less virulence
- Some countries have removed all mandates
- State/CDC starting to put out new guidance
- Some venues no longer requiring proof of vaccination or tests results
- Home testing

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Testing

- Declining demand
- Mass testing is not always going to be available
- At-home kits becoming more available
- Diagnostic verses screening
- Some places will need to be more proactively testing

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Case Investigation and Contact Tracing (CI/CT) Isolation and Quarantine (I&Q)

- Universal case investigations and contact tracing (CI/CT) is no longer useful to help stop community spread
- Isolation and quarantine guidance is closely linked to CI/CT
- Point of service operation
  - clinic, tests site, at home testing
  - I/Q (still recommended)
- BCHD will use CI/CT and I/Q for outbreak response

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Vaccine Operations

- Demand is now low
- Available through many sources
  - BCHD
  - Most medical clinics (Vidant, AGAPE)
  - Pharmacies
    - Local
    - Chains (CVS, Walgreens, Wal-Mart)
- BCHD moving towards regular clinic visit model

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Public Education

- Like other diseases in our world, we must understand our risk and mitigate the risk
- Fear
- High Risk community
- Illness management
- Masks
- Requirements of venue/travel
- Availability of resources

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Surveillance

- Case Counts – Not precise
- Positivity rates – highly reflective of confirmation tests, symptoms and contacts
- Testing numbers – at home influence
- Test avoidance
- Changes
  - CDC
  - State
  - Weekly

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CDC UPDATE

COVID-19 Community Levels – Use the Highest Level that Applies to Your Community

New COVID-19 Cases Per 100,000 people in the past 7 days	Indicators	Low	Medium	High
Fewer than 200	New COVID-19 admissions per 100,000 population (7-day total)	<10.0	10.0-19.9	≥20.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	<10.0%	10.0-14.9%	≥15.0%
200 or more	New COVID-19 admissions per 100,000 population (7-day total)	NA	<10.0	≥10.0
	Percent of staffed inpatient beds occupied by COVID-19 patients (7-day average)	NA	<10.0%	≥10.0%

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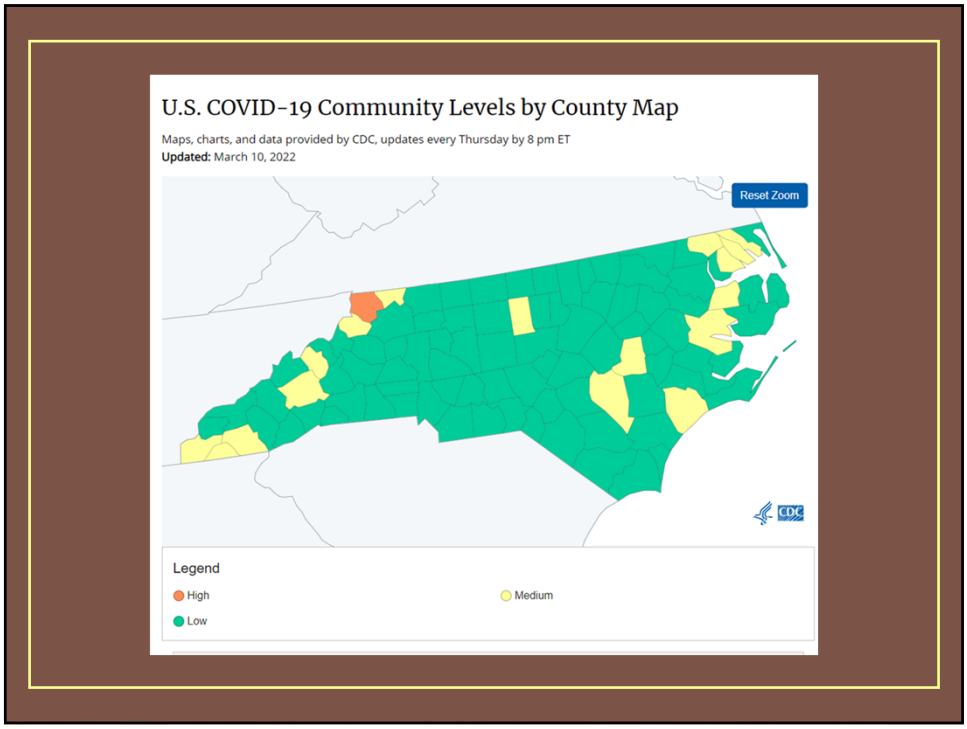

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Monitoring Trends

- CDC Community level
- Wastewater trends
- CLI in Emergency Department
- Hospital admissions
- Case count trend
- Variant information

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Reports / Updates

- EM reports to stop
- BCHD website to maintain data until summer (may simplify or tweak)
- Eventually, COVID reporting will become part of the annual Communicable Disease report given to the Board of Health.
- Trends will be monitored for surges or up-tics
- BOCC update

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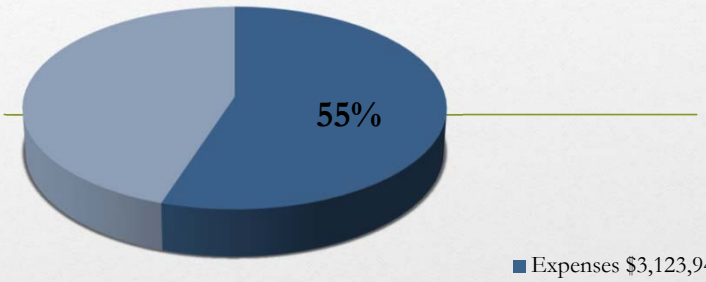
FY 2022 Expenditures

(as of 02/28/22)

~67%



Expenses $3,123,943.59

Budget $5,675,230

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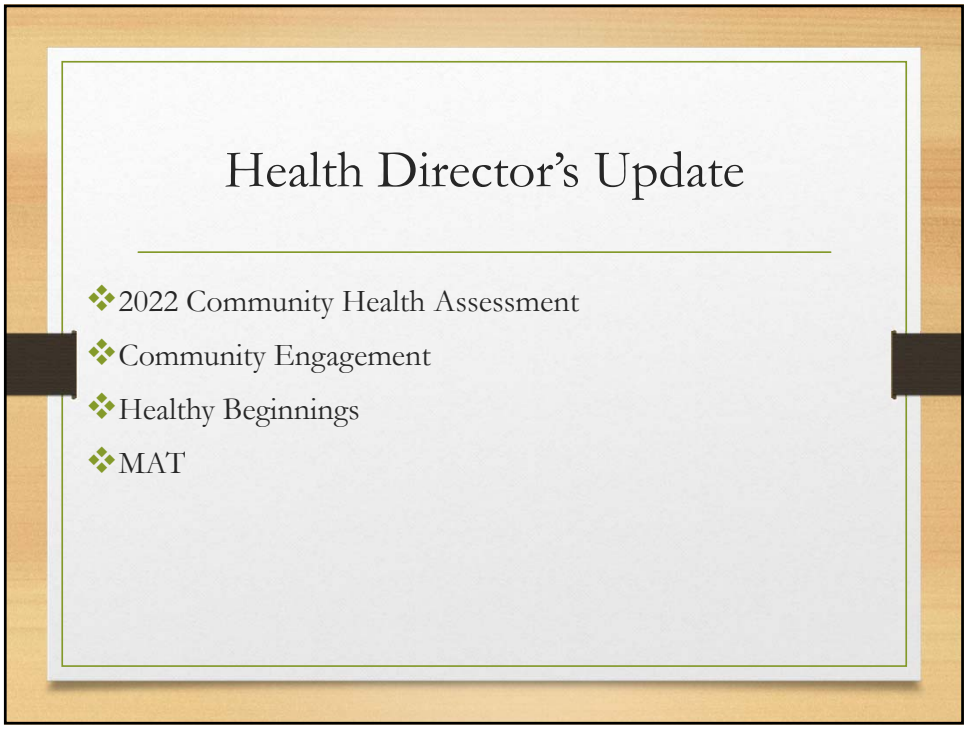
FY 2022 Revenue

(as of 02/28/22)

Revenue Source	YTD	Budget	% to Budget
State *(includes WIC)*	$997,305.6	$2,057,409	48.4%
Medicaid	$339,956.15	$671,269	50.6%
Fees/Insurance/ Other	$858,424.43	$904,590	94.8%

22


Health Director's Update
2022 Community Health Assessment
Community Engagement
Healthy Beginnings
MAT

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