

## BLACK HAWK COUNTY BOARD OF HEALTH MEETING

August 28, 2019

The meeting of the Black Hawk County Board of Health was called to order at 7:30 a.m. by Chair, Rev. Dr. Mary Robinson, in Room 420 of the Pinecrest Building, 1407 Independence Avenue, Waterloo, Iowa. Members present: Vice-Chair, Bonnie Sadler via telephone, Dr. Adam Roise, Dr. Wesley Pilkington, Dr. Catherine Zeman, and Attorney Mike Treinen. Absent: none. A quorum was met.

Others present: Samantha Cheng, Dr. Nafissa Cisse Egbuonye, Eileen Daley, Ben Flick, Terry Helinski, Brenda Hostetler, Kim Howard, Patti Humpal, Sandy Kahler, Megan Olmstead, Jared Parmater, Lori Rottinghaus, Mary Kate Skalitsky, and Katie Strub.

Unless otherwise noted, all actions were approved unanimously.

I. Approval of Agenda – For Vote

Discussion: Amended to add one more presenter in Section V, Katie Strub from Allen Child Protection Center.

Action: Dr. Zeman moved, and Dr. Roise seconded, to approve the amended agenda as discussed. Motion carried.

II. Approval of Minutes – For Vote

Discussion: none

Action: Dr. Roise moved, and Dr. Pilkington seconded, to approve the July 24, 2019 Regular Meeting minutes. Motion carried.

III. Public Comments – No public comments

IV. Introductions

Dr. Roise introduced the medical students visiting the Health Department, Samantha Cheng, Ben Fick, and Mary Kate Skalitsky.

V. Presentations:

A. Sandy Kahler from Allen Women's Health Center reported to the board and provided handouts.

Discussion:

Family Planning Program overview:

- Allen Women's Health celebrated 50 Years of Service. The history of this center was a collaboration with the Black Hawk County Health Department and University of Iowa Hospitals.
- The Center is hiring one more Nurse Practitioner due to the overflow of patients transferring from MercyOne.
- New Title X regulations have been put in place by the current administration that has more focus on abstinence, and abstinence until marriage, but the Center is encouraging teens to talk to trusted adults about contraceptives if they are interested. Unintended pregnancy discussions can include a list of pre-natal providers and cannot include termination. Ms. Kahler stated there is less worry about the restrictions since there is more access to information in current times online, etc.

Maternal Health Program Overview:

- The Maternal Health Program provides services in Waterloo and Cedar Falls, including Unity Point OBYGN, through title V funding even though there is a lack of funding and the program depends on revenue from other programs and from local organizations. Total Iowa Care MCO allows one prenatal visit per trimester versus once per month as previously

allowed before the privatization of Medicaid.

Discussion:

Dr. Pilkington asked what the other MCO's limitations look like compared to Total Iowa Care.

Ms. Kahler stated that they have been able to work with other MCOs to provide services on a case-by-case basis. Title X funding no longer pays for care coordination and arranging for transportation, although the social workers are still doing that work. Since the patients are required to call the MCO to arrange for transportation three days in advance, patients are not getting to their appointments as often as they should. The barriers are that they may not remember to do this ahead of time, and if there is a more emergent health issue, transportation cannot be arranged short notice, forcing the patient to use emergency room services at times.

Dr. Roise asked if once per trimester rule was set by the MCO or was it by the state and Medicaid.

Sandy Kahler said that there can be a pre-authorization submitted to be seen more than one time per trimester for the Maternal Health appointments based on the patient's needs, and this would not include the OBGYN appointments.

- B. Katie Strub from Allen Child Protection Center (CPC) reported to the board and provided handouts.

Program Overview:

- The CPC provides an array of services and a multidisciplinary team approach to provide services for children or dependent adults for suspected abuse.
- Large portions of clients are located in Black Hawk County.
- The satellite office in Mason City helps reach out to families that do not have resources to travel for these services.
- In 2018, 547 patients were seen.
- In 93% of these cases, the child knows the offender, and the center encourages the schools and law enforcement to train/teach kids what to do if someone they know hurts them. Stranger danger is not an effective training tool due to the number of offenders that are known to the victims.
- The CPC trains community partners on what to do when a child reports abuse.
- CPC does not bill the family, law enforcement, or Department of Human Services for the services provided. They do receive revenue for medical examinations for sexual abuse and will bill the Iowa Attorney General's office.
- Next year, the Allen CPC will roll out services to drug exposed infants from age zero to five. One of the goals of this program is to identify these patients prior to enrolling in school. The proper diagnosis can lead to proper treatment and can prevent misdiagnosis as a behavioral issue once the child is in the school system. Federal grant funds and the CPC will be working with an expert consultant to get the program started.

Discussion:

Dr. Zeman asked for an example of how the Allen CPC saves money as presented on the handout.

Ms. Strub stated that they save \$1,000 per child using the Allen CPC instead of going to separate locations to be examined and interviewed (law enforcement and Department of Human Services team together with CPC). The benefit to the child does not have to repeat themselves to experience the traumatic event repeatedly. The environment is neutral and non-threatening to the children being served.

Rev. Dr. Mary Robinson asked about the staff's self-care.

Katie Strub said that Sandy Kahler is the leader of this initiative, and accreditation requirements

mandate self-care. Regular check-ups are completed and CPC staff have a great relationship with EAP (Employee Assistance Program), and have several de-briefing sessions and team-building activities.

Rev. Dr. Robinson asked why Black Hawk County numbers are so high versus all of the other counties in the service area.

Ms. Strub stated that Black Hawk County is the most populated county in the service area so the percentage is not surprising. Ms. Strub stated that the low referrals might be because of lack of education in the more rural communities. A Community Liaison has been hired that reaches out to the law enforcement areas that do not see many referrals from to ensure they are sending referrals when needed. This may be an issue of lack of education and getting information out there for less populated counties

VI. Health Department Update presented by Dr. Cisse Egbuonye:

Summary of update:

- The department is continuing recruiting for open positions. On September 9, 2019, equity systems mapping Workshop for staff and external stakeholders will take place at Pinecrest and at the University of Northern Iowa. Engaging Inquiry will be here that week to train the stakeholders how to socialize the map to the community. The objective is to share this process with the community to obtain buy in. After this training, the process will move toward solutions or leveraging the MAPP process.
- Dr. Cisse Egbuonye presented the Proclamation from the City of Waterloo with Rev. Dr. Robinson. Rev. Dr. Robinson stated this has stemmed from the article published in the 24/7 Wall Street Journal article (2018) that stated that the Waterloo/Cedar Falls metro area is the worst place for African Americans to live in America. In 2014, the metro area was ranked tenth. Rev. Dr. Robinson presented to the city council on 12/17/19, and the city issued this proclamation on August 19, 2019 as a day to move forward and to recognize the causes of the inequities present in the community. This proclamation is also recognizing Black Hawk County Board of Health, Black Hawk County Health Department, Dr. Cisse Egbuonye, and Rev. Dr. Robinson as leaders in the community that have initiated the work it will take to remove these barriers and make the Cedar Valley a better place to live for everyone. Rev. Dr. Robinson thanked the Mayor, City Council, Waterloo Human Rights commission, and most of all the Black Hawk County Health Department for this proclamation.
- Dr. Cisse Egbuonye announced that Rev. Dr. Robinson was also the recipient of the Prathia Hall Community Social Justice Award.
- Dr. Cisse Egbuonye added that the equity systems mapping workshops have really helped identify the determinants of health and identify why certain populations are having difficulties navigating the health care system in our community. Iowa legislator have inquired on this process and will be attending the next workshop to learn more about systems mapping.

VII. Personnel Action Request– For Vote – Eileen Daley

Discussion: Ms. Daley reviewed staffing needs that will require deletions and additions due to clinical structure changes to align with programmatic needs for the new fiscal year.

Dr. Pilkington asked if operations would be affected by the deletion of the clerk position.

Ms. Daley answered stated operations will not be affected because the clerk position was tied to a contract that has been terminated.

Dr. Roise asked about the reduction in FTE for the Nurse Practitioner.

Ms. Daley stated hiring a part-time up to full-time Nurse Practitioner is due to the current clinical needs. There will be a need for an increase in providers in the future.

Action: Dr. Roise moved, and Dr. Zeman seconded, to approve the deletions of three full-time Clerk Typist II positions, one 0.6 FTE Public Health Nurse, and one full-time Nurse Practitioner; the creation

of one full-time Health Outreach Worker (Oral Health), one full-time Public Health Nurse, and one 0.6-1 FTE Nurse Practitioner positions; and to increase one .69 FTE Health Educator position up to 0.78-1.0 FTE. Motion carried.

VIII. Financials

A. Disbursements\* – For Vote

Discussion: Patti Humpal provided an overview of the disbursements and explained some of the costs.

Action: Dr. Pilkington moved, and Dr. Roise seconded, to approve to pay the bills as presented. Motion carried.

B. Patti Humpal presented the Financial Report as of 08/22/2019 to the Board.

Discussion: No discussion.

IX. Grants and Contracts Memo-Consent Agenda\* – For Vote

The following items will be acted upon by vote on a single MOTION, without separate discussion, unless someone from the board or the public requests that a specific item be considered separately.

- A. Application (Renewal) FY20 28E Tattoos and Pools Inspections, IDPH
- B. Memorandum of Agreement (New) FY20 Nutrition Counseling Services, Operation Threshold WIC
- C. Memorandum of Agreement (New) FY20 First Responders-Comprehensive Addiction And Recovery Act Cooperative Agreement, Pathways Behavioral Services
- D. Memorandum of Agreement (Renewal) FY20 Hospital Preparedness Program (HPP) and Public Health Emergency Preparedness (PHEP) Cooperative Agreements, Sub-Service Area 6B Partners (*Pending review w/IDPH*)
- E. Contract (Renewal) FY20 Iowa Nutrition Network School Grant Program (INNSGP), IDPH
- F. Contract (Renewal) FY20 Intervention Implementation in Target Populations, IDPH
- G. Contract (Renewal) FY20 Grants to Counties, IDPH
- H. Contract (Renewal) FY20 Childhood Lead Poisoning Prevention Program, IDPH
- I. Contract (Renewal) FY20 Local Public Health Services, IDPH
- J. Contract (Renewal) FY20 Public Health Emergency Preparedness, Hospital Preparedness Program, Emergency Medical Services System Development, Cities Readiness Initiative-Metropolitan Statistical Areas, IDPH
- K. Sub-Contract (Renewal) FFY20 Child Oral Health Services, SuccessLink
- L. Service Agreement (Renewal) (09/01/19-08/31/2021) Biohazardous Regulated Medical Waste Disposal, Stericycle, Inc.
- M. Contract (Amendment 1) MOU-2019-ELC20, Mosquito Surveillance, IDPH
- N. Contract (Amendment 1) FY19 1<sup>st</sup> Five HMDI – Implementation Phase, IDPH
- O. Contract (Amendment 8) FY19 Community Based Programs of Maternal Health and Child & Adolescent Health, IDPH
- P. Contract (Amendment 1) CY19 Integrated HIV and Viral Hepatitis Testing Services, IDPH
- Q. Contract (Amendment 1) FY20 Care for Yourself – Breast and Cervical Cancer Screening Program, IDPH
- R. Contract (Amendment 1) FY20 Iowa Nutrition Network School Grant Program (INNSGP), IDPH

Discussion: Mike Treinen pointed out that the insurance requirements for (Item J) from the county should not have to be included. Mr. Treinen is requesting PDCM to review this contract for risk management. Approval of J would be subject to determination of whether the county would require insurance or not per PDCM recommendation (Black Hawk County's insurance consultant company). The board agreed to move forward with item J as approved but it will be subject to approval as noted above.

Rev. Dr. Robinson asked how would it be determined if a child is enrolled in WIC or not. (Item B)

Mr. Parmater explained that when a child's blood lead level is elevated, that starts the referral process to WIC for nutritional counseling. If the child is already enrolled in WIC, they will proceed with the referral; however, if the child is not enrolled and does not qualify, this Memorandum of Agreement will allow all children to use WIC services when there is an elevated lead blood level.

Rev. Dr. Robinson asked how the environmental issues are handled. (Item B)

Mr. Parmater stated that the child is removed from the home until the lead is removed. Sometimes this is more challenging because properties are rentals, and will need to use Iowa administrative code to enforce these mitigations.

Dr. Zeman inquired if there are funds available to mitigate the home when child has been removed.

Mr. Parmater stated no, there is not any funding available to mitigate these homes, but the property owner is responsible for mitigation and no one can move back into the home until the mitigation process has been completed.

Rev. Dr. Robinson asked for more explanation on item D.

Ms. Humpal explained that item D is a sub-contract that allows the 6B sub-service areas to submit claims to the Black Hawk County Health Department for reimbursement under the BETS contract with Iowa Department of Public Health.

Rev. Dr. Robinson asked for more explanation on item Q.

Dr. Cisse Egbuonye stated that the purpose of the amendment is to remove language that would restrict eligibility criteria like age and income for clients to receive patient navigation services.

Action: Dr. Pilkington moved, and Dr. Zeman seconded, to approve items A-R as presented on the grants and contracts memo with the condition listed above for item B. Motion carried.

X. For Information Only

A. Community Health Worker & Public Charge –Terry Helinski

Community Health Care Worker Overview by Terry Helinski

Iowa Chronic Care Consortium has launched its first Community Health Worker training program and will be consulting with Black Hawk County Health Department in establishing a Community Health Worker model with EMBARC based on Iowa Chronic Care Consortium's model. The community health workers are less credentialed than nurses or social workers, frequently are from the community of origin, and are able to provide culturally specific services.

Public Charge Overview (Ms. Helinski will follow-up with links to the documents presented)

On August 12, 2019, the Public Charge was redefined by the Trump administration to apply to immigrants who use one or more public benefits, which could result in denial of legal status.

Immigration officials will look at variety of factors (age, health, family status, assets, resources, financial status, education, use of certain benefits) to determine the likelihood of immigrants to support themselves in the United States.

Under the new rule use of previously excluded programs like: non-emergency Medicaid for non-pregnant adults, section 8, SNAP benefits, and supplemental nutrition programs would be

considered a public charge.

This new rule will create new barriers in obtaining a green card and will lead to worse health outcomes: increase in emergency room services for primary care, uncompensated care, poverty, housing, etc. Several legal challenges have been presented, but the outcome of these challenges is not currently known. The rule is proposed to become effective on October 15, 2019.

Dr. Cisse Egbuonye expressed concern about the confusion and withdrawal from services that the department provides.

Dr. Cisse Egbuonye stated that there is a lack of data to prove that immigrant populations taking these benefits is higher than other populations. There should be some investigation into what kind of data could be reviewed to evaluate and educate the public.

Dr. Roise stated that there is a presumption that immigrants do not pay taxes but that is clearly not the case and that there is a lot of misinformation. Physicians are trained to address these issues one on one with patients. Public Health should take on the role of educating the public.

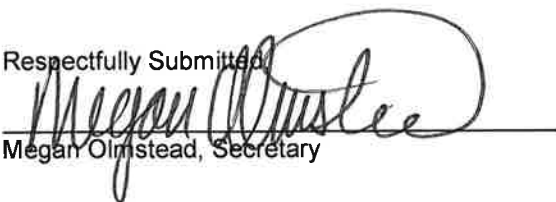
Rev. Dr. Robinson stated that there are implications for the individuals that are writing affidavits for immigrants and stating that the individual will not be a public charge.


Rev. Dr. Robinson commended Terry Helinski for representing the Black Hawk County Health Department at the Liberian induction of officers recently. The Liberian community appreciated the department's presence at the induction ceremony.

B. Board of Supervisors Update – Linda Laylin  
Linda Laylin was not able to attend.

- XI. Date of Next Regular Board of Health Meeting: September 25, 2019 at 7:30 a.m. – Room 420, Pinecrest Building, 1407 Independence Ave., Waterloo, Iowa.
- XII. Adjournment – Dr. Roise moved, and Dr. Pilkington seconded, to adjourn the meeting. Motion carried. The meeting adjourned at 8:35 a.m.

Respectfully Submitted

  
Megan Olmstead, Secretary

  
Rev. Dr. Mary Robinson, Chair