

MARICOPA COUNTY BOARD OF HEALTH
Meeting Minutes
Administration Building
301 W. Jefferson Street, 10th Floor
Board of Supervisors Conference Room
Phoenix, Arizona 85003
June 23, 2008, 3:00 pm

Ms. Adamic called the meeting to order officially at 3:22 pm with a quorum present.

ROLL CALL:

Members Present:

Audrey Adamic
Don Cassano
James Giangobbe, M.D.
Zuhdi Jasser, M.D.*
Michael Kearns
Brian F. Spicker*
Pam Wight

Members Excused:

Maricopa County Supervisor Andrew Kunasek, District 3
Jim Vandeventer

Members Absent:

Susanne Cook, RN, PhD

Ex-Officio: Bob England, M.D.

(* Denotes members arriving after Roll Call)

CALL TO THE PUBLIC:

Ms. Adamic advised that if anyone from the public is present at the meeting today who would like an opportunity to speak, a Speaker Request Form is available and must be filled out prior to addressing the Board of Health. The Board of Health cannot respond to questions from the public under the Call to the Public section.

DISCUSSION ITEMS

1. Public Health Report

-Dr. England

Dr. Bob England presented the following matters to the Board.

Human Resources

- *Reductions in Force – Gone through one reduction so far, lost 14 positions, by not filling vacancies that we already had it resulted in only 2 individuals being RIFd*

Infrastructure

- *County funds are still at a 5% cut for now*
- *The county has real limitations in the ability to spend; this inhibits the policy decision to fund the public health department.*

The question was asked if there were other areas that the County can cut or move money in order to fully fund and provide for the public health

Dr. England responded that the most rationale long term solution would be a public health district – this does a number of things – 1) none of the expenditures count toward the County spending cap; 2) carries the opportunity for the Board of Supervisors to create a special taxing authority, either sales or property tax.

Another question was asked whether or not the limit included fee funds?

- Dr. England responded that the spending cap includes local tax revenue, fees and contracts but does not include grants.*
- *The state hiring freeze affects us because we had been working with ADHS to share positions.*
 - *Tobacco – final budget cut was more than \$2 million; we were able to get \$282,000 back by taking the Smoke Free AZ (Workplace) money.*

President Adamic asked Dr. England to hold the remainder of his report and called the action items on the agenda.

DISCUSSION/ACTION ITEMS:

1. Approval of the May 19, 2008 Board of Health Retreat Minutes: -Ms. Adamic

Ms. Adamic had a correction to the minutes saying that she was the one who made the correction to the last minutes and not Dr. Cook.

Mr. Cassano made the motion to approve the May 19th, 2008 Retreat minutes as amended. Dr. Giangobbe seconded the motion. The motion passed with a 7 to 0 vote.

Dr. Jasser arrived at 3:20 pm

2. Fee Waivers: -Ms. Minichiello

A New Leaf, La Mesita Family Shelter, Glendale Lamar Head Start, Tempe Adult Day Care, Central Phoenix Adult Day Care, Adult Day care

Ms. Minichiello presented 4 fee waivers for approval.

Mr. Cassano made the motion to approve the fee waivers as recommended. Mr. Kearns seconded the motion.

Discussion –

Mr. Kearns made a comment regarding the huge amount of fee waivers in April and May and wanted to know if this was going to be ongoing and made the suggestion to maybe look more into this next year to see if funds could be spent elsewhere unless it continues to be only a few thousand dollars each month.

Ms. Adamic responded by saying that part of the reason why the size/number of fee waivers has increased so dramatically is because now Ms. Minichiello is doing a review and these entities that are serving the underserved and underprivileged must renew their application on an annual basis and that is where this huge increase in the last few months has come in effect due to the health code change.

Dr. Jasser also commented that the fees that are being waived are related to inspections and other things that they need to have done that they are administering for the public health. Most of the agencies that we are waiving are not private companies that have for profit monies. It is part of the public good that we do.

The actual percentage of fee waivers in comparison to the total fees charged is probably less than 1%

A call for a vote to the standing motion was requested. The motion passed with a 7 to 0 vote.

3. Discussion and Possible Revision to Board of Health By-Laws -Ms. Adamic

The Board reviewed the current Bylaws and discussed possible revisions as follows:

Article 6, Section 3 states “The term of the president shall be for one year. Individual members are limited to serving two consecutive years each for office of president and vice president-finance. There is a presumption that the member holding office of vice president-finance shall advance to office of president.”

Board members discussed whether to continue with that presumption and also limit the terms or to revise this particular part of the by-laws, if for some reason due to the workload, etc. the vice president cannot automatically advance from vice-president to president. In addition, the current bylaws would prohibit a president who had already completed two consecutive terms and desired to serve another term from doing that.

Dr. Cassano made the motion to amend the current by-laws Article 6, Section 3 under officers to say that the term of president and vice president-finance shall be for two years and that individual members will be limited to serving two year terms and one additional one year term if so desired by the Board of Health and to remove the following sentence under Article 6, Section 3 – There is a presumption that the member holding office of vice-president-finance shall advance to office of president. Dr. Giangobbe seconded the motion. The motion was passed with a 7 to 0 vote.

Dr. Giangobbe made a motion to add language to Article 2 to include sexual orientation in the non discrimination clause. Mr. Spicker seconded the motion. The motion was passed with a 7 to 0 vote.

DISCUSSION ITEMS (continued)

1. Public Health Report

-Dr. England

Strategic Planning

- *The Community Health Services division has done a good job, working within the resource limitations we have, of doing good strategic planning and good self assessment. We intend to use the same individuals that helped the CHS division create this model and extend it to the rest of the department.*
- *Community-wide evaluation is more difficult and is the real priority.*

Programs

Disease Control

- *A lot is going on in PHEM. The CRI (City Readiness Initiative) site visit is today, June 23rd and tomorrow, June 24th; a mass vaccination is coming up on August 2nd, 2008 and will hopefully provide vaccines to more than 2,000 children; PHEM is currently in the reapplication cycle for our CDC Emergency Management funding and the budget is due July 15th, 2008.*

- *We are taking a new approach to hiring staff in PHEM – Many of our PHEM positions are of a nature where they have to interact with outside agencies and professionals in a highly professional matter, we have been unsuccessful at getting these positions ranked to get the type of people we want in these positions. Even though we have the funding to pay them the county Compensation system will not allow us to offer a salary range that attracts and retains the level of professionals we need. We are planning to contract out several of the positions, which means fewer people but hopefully we can pay them enough that we can attract some consultants that would work well within the position. We may also contract to agencies, rather than individuals, for some functions. The question was asked what types of agencies that are being looked into. Dr. England responded by saying it depends on who responds. We want applicants with particular skill sets depending on the tasks involved.*

The Board also asked if there is a clear cut description of the goals of PHEM.

Dr. England replied by saying that the specific description of goals has evolved over time since the funding has begun. The functions that CDC has expected related to PHEM have changed substantially over time. Originally, we had a checklist with very particular deliverables. In the last couple of years the CDC has been more flexible to allow states to set the parameters for priorities. This year, exercises will be a huge component.

- *Vitals – the new statewide electronic vital records system is going online July 1st – there will be some delays and some frustration but we are doing the best we can to accommodate to the new system.*
- *CHN – we are planning for the mass flu vaccination in schools in the wake of the ACIP recommendation to vaccinate all school aged children. We do not expect to get to the point of full implementation until the fall of 2009.*

Community Health Services

- *Community Health Services just applied for a grant called the Strategic Alliance for Health. The grant basically is designed to integrate together diet, exercise and tobacco prevention outreach campaigns. It would begin at \$240,000 the first year with the possibility to rise to \$600,000 over time.*

Disease Updates

- *West Nile Virus – no new confirmed cases since the one that was mentioned last meeting; environmental has gotten legal approval from the County Attorney to enter abandoned properties*
- *Rabies vaccine shortage – how bad this gets will depend on how long the shortage is. Production problems in one plant.*
- *Measles – haven't seen an official announcement that the outbreak is over but it is getting close*
- *Tomatoes – we have more than 400 reports of salmonella in this county annually, reflecting tens of thousands of actual cases. There are only 12 cases so far linked to this outbreak.*
- *Heat – We have had an extremely long period of average temperatures exceeding 100 degrees for this early in the season. Excessively high low-temps for the day are most detrimental. The life threatening risk to individuals often come s when it never cools off enough for a person who doesn't have air conditioning to recover from the high*

temperature. This is especially hard for our homeless population. The hot energy plan is in operation. MIT agencies are distributing water and cooling stations are open.

Announcements and Current Events

-Board Members

No announcements or current events discussed

Adjournment

Mr. Cassano made the motion to adjourn the meeting, Ms. Wight seconded the motion. The motion was passed with a 7 to 0 vote.

The meeting was adjourned at 4:17 pm.