



Scott County Health Department

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SCOTT COUNTY BOARD OF HEALTH

May 19, 2022

MEETING MINUTES

12:00 p.m.

Meeting Held at: Scott County Administrative Center
600 West 4th Street – 1st Floor Board Room
Davenport, Iowa 52801

Dr. Hanson, Chair of the Scott County Board of Health, called the meeting to order at 12:00 p.m.

Members Present: Dr. Hanson, Dr. O'Donnell, Mr. Robinson, Dr. Franzman

Members Absent: Dr. Schermer

Staff Present: Amy Thoreson, Brooke Barnes, Briana Boswell, Nicole Miller, Tiffany Peterson, Lori Steiner, Andrew Swartz, Mariah Bryner, Anna Copp, Carole Ferch, Ellen Gackle, Lashon Moore, Brenda Schwarz

Others Present: David Farmer, Scott County Budget and Administration Services Director; Linda Frederiksen, MEDIC EMS Executive Director; Diane Martens, Scott County Kids Early Childhood Iowa Coordinator; Mahesh Sharma, Scott County Administrator; Mary Thee, Scott County Assistant County Administrator/Human Resources Director; Dr. Richard Vermeer, Scott County Emergency Medical Services/Physician's Advisory Board Medical Director

Dr. Hanson called for a motion to accept the agenda. Mr. Robinson moved to accept the agenda. Motion seconded by Dr. O'Donnell. Motion carried unanimously.

Dr. Hanson called for a motion to accept the minutes. Dr. O'Donnell moved to approve the minutes of the April 21, 2022 Board Meeting. Motion seconded by Mr. Robinson. Motion carried unanimously.

The following reports were reviewed and discussed by the Board:

A. Director's Report

Mrs. Thoreson recognized new part-time employee, Nick Blieu, who has been hired as a Juvenile Detention Center Correctional Health Nurse. Mr. Blieu joined the department on April 18th.

Mrs. Thoreson introduced new employee, Ellen Gackle, who has been hired as a Community Health Consultant. Mrs. Gackle joined the department on April 29th.

Mrs. Thoreson introduced new employee, Mariah Bryner, who has been hired as a Community Health Consultant. Mrs. Bryner joined the department on May 2nd.

Mrs. Thoreson announced Katie DeLaRosa has been promoted as the Disease Intervention Specialist. Ms. DeLaRosa started her new role on April 25th.

Mrs. Thoreson shared Leslie Ronnebeck has been promoted as the Correctional Health Manager. Mrs. Ronnebeck will begin her new role on May 22nd.

Mrs. Thoreson reported, as of the meeting, IDPH reported 46,569 positive COVID-19 tests in Scott County; 30-50 cases are being reported daily. Mrs. Thoreson noted the numbers reported are undercounted due to home test kit results not being reported. Scott County hospitalizations continue to trend up and are being monitored carefully.

Mrs. Thoreson reported staff continues to meet with Community Health Care, Inc., Genesis Health System, UnityPoint Health, and Scott County EMA weekly.

Mrs. Thoreson shared, as of the meeting, UnityPoint Health reported the percent of positive tests among those suspected of having COVID-19 has increased. The current seven day moving average was 22.9% compared to the previous seven day moving average of 17.1%. The percent of positive tests among screening patients (those unsuspected of having COVID-19) increased with the current seven day moving average at 3.2% compared to the previous seven day moving average of 1.9%. The number of inpatient positive COVID-19 patients has increased over the past week with an average of twelve patients per day compared to eight patients per day the previous week. The number of daily COVID-19 positive admissions are 2.6 admissions/day compared to 1.6 admissions/day the past week. The average age of COVID-19 positive patients (inpatient/ED) over the past seven days was 48 years.

The department continues to offer Johnson & Johnson and Pfizer-BioNTech COVID-19 vaccine through a weekday walk-in clinic. The department continues to distribute test kits.

Mrs. Thoreson shared the Advisory Committee on Immunization Practices (ACIP) is meeting to discuss the Pfizer-BioNTech COVID-19 vaccine booster for children ages 5 to 11.

The U.S. Food and Drug Administration (FDA) has scheduled their Vaccines and Related Biological Products Advisory Committee (VRBPAC) to meet on June 7th to discuss an Emergency Use Authorization (EUA) request for a COVID-19 vaccine manufactured by Novavax for individuals 18 years of age and older.

Mrs. Thoreson shared the pilot project for testing wastewater for the COVID-19 virus started the week of May 16th. Staff, representatives from the City of Davenport Public Works Department, and State Hygienic Laboratory will meet in June to discuss project progress and its future direction.

Mrs. Thoreson asked Tiffany Peterson to report on an opportunity staff have to participate in an effort to evaluate Human Immunodeficiency Virus (HIV) messaging. Mrs. Peterson shared

that staff were contacted by the University of Pennsylvania to participate in a two-month study, *American Regional Messaging Targeting for HIV*. The goal of the study is to end the HIV epidemic by requiring outreach through new media to disseminate information about services. The University will provide a variety of messages from which to choose. The department will post five to ten messages per week for two months while the University tracks the outreach of the messages by monitoring the department's social media accounts. The department will be reimbursed \$400 and is required to complete an informed consent to participate.

Mrs. Thoreson asked Mrs. Peterson to give an update on the Community Health Improvement Plan (CHIP) progress. Mrs. Peterson shared staff have partnered with the Rock Island County Health Department to seek feedback from the Be Healthy QC Coalition and QC Behavioral Health Coalition on the status of the 2019 CHIP. The information gathered will be utilized to update the status and modify the current plan, as well as be used as a starting point for the next CHIP as work begins in July.

Dr. O'Donnell asked if staff will be updating the Board on the progress made on improvements and tasks completed from the initial assessment.

Mrs. Peterson responded that staff can share with the Board the data and activities that have taken place in the plan as it is updated.

Dr. O'Donnell shared as the health systems look at their initiatives for population health measures, it is important that everyone has a similar plan and work together.

Mrs. Thoreson asked Briana Boswell to report on the maternal health collaboration on low birth weight. Mrs. Boswell shared it has been recognized that there are differences in the rates of low birth weight babies born in the Quad Cities to individuals of color. Staff were invited to participate in the Quad City Health Initiative Planning Taskforce for low birth weight with Community Health Care, Inc., Genesis Health System, UnityPoint Health, and Rock Island County Health Department. The group has met twice and is currently reviewing and summarizing the various data from the taskforce's variety of data sources.

Mrs. Hanson asked if there is an update on the Doula Pilot Project.

Mrs. Boswell explained that staff are coordinating the seven available spots in the Doula Pilot Project that serves African American/Black or persons of color utilizing doulas of color. The program is due to end late summer, and at that point staff will have information to share.

Dr. Hanson inquired if birth weight information is collected and shared.

Mrs. Boswell shared that birth weight is a question on the discharge form.

Mrs. Thoreson reported that an effort is underway to re-engage the department workgroups that existed prior to the pandemic and to establish several new workgroups based upon identified needs in the department's strategic plan. A presentation will be coming on the workgroups during the June Board of Health (BOH) meeting.

Mrs. Thoreson noted the School Dental Screening Requirement Summary for the 2021-2022 school year is included as Attachment 2 of the Director's Report.

- B. Dr. Hanson moved to the Public Health Activity Report for the month of April 2022.
- C. Dr. Hanson moved to the Budget Report for the month of April 2022.

Following discussion, Dr. O'Donnell moved to approve the claims. Motion seconded by Mr. Robinson. Motion carried unanimously.

- D. Dr. Hanson moved to the Scott County Kids Report.

Diane Martens thanked Anna Copp, Community Tobacco Consultant, for providing a presentation to participants of the Scott County Kids NEST program. The session was recorded and will be shared with other NEST participants.

- E. Dr. Hanson moved to the Title V, Local Public Health Services, and Tobacco Use Prevention Program Report.

Mrs. Boswell reported staff are making plans for summer outreach to families. Staff have been planning fun activities and gathering supplies to engage children and parents at several community events. Staff will be working to link them to medical and dental homes, health insurance coverage, and community resources.

Mrs. Boswell shared staff have been developing needs assessments/gap analysis, action plans, partnerships, and program budgets in preparation for the FFY23 Maternal Health (MH) and Child and Adolescent (CAH) Health requests for proposals (RFP). There is a strong focus on family engagement and community partnerships. The MH RFP is due May 25th and the CAH RFP is due June 15th.

Tiffany Peterson reported the Local Public Health Services application for FY'23 has been submitted. Mrs. Copp, two students, and an educator from Central High School attended the annual Iowa Students for Tobacco Education and Prevention (ISTEP) Summit at the Iowa Fairgrounds in Des Moines.

- F. Dr. Hanson moved to the Board of Health Orientation – MEDIC EMS Overview – Linda Frederiksen, Executive Director, MEDIC EMS

Mrs. Frederiksen explained MEDIC EMS was collaboratively organized on May 25, 1982 as a 501(c)(3) non-profit ambulance service by Scott County, St. Luke's, and Mercy Hospitals (precursors to Genesis Health System) with 32 employees and 4 ambulances. MEDIC EMS currently has 167 employees, when fully staffed, and 20 ambulances with a 15 member Board of Directors.

Mrs. Frederiksen shared MEDIC EMS is the exclusive Scott County service provider for geographical areas A and E, and only ambulance transporting service serving Scott County

within Scott County. MEDIC EMS provides Advanced Life Support for 406 of Scott County's 456 square miles.

Mrs. Frederiksen explained while MEDIC EMS continues to operate efficiently, a shift to an increased number of Medicaid/Medicare patients has contributed to a reduction in revenue for services provided in the last several years. Recently, MEDIC EMS has faced challenges hiring and retaining staff due to a competitive health care labor market, and they have felt the impact of labor, supply, and fuel cost increases. Mrs. Frederiksen shared MEDIC EMS receives up to a \$200,000 annual subsidy from Scott County to cover budget shortfalls.

Mrs. Frederiksen asked David Farmer to present the four consideration options of different EMS service delivery models. Mr. Farmer presented the following options:

Option #1 – Pursue Chapter 422D

The Scott County Board of Supervisors could declare emergency medical services (EMS) as a county essential service. In order to fund the essential service with a separate tax levy, there would need to be a public referendum, which would require 60% voter approval. If passed, the county could levy a dedicated tax to generate funds for EMS for up to 10 years. This could be in the form of local income surtax, local property tax (up to \$0.75 per \$1,000 of assessed value), or a combination of both. This model exists in two of the 99 counties and requires the establishment of an Emergency Medical Services Advisory Council (EMSAC). The EMSAC annually assesses and reviews the EMS needs of the county, determines how funds generated through the tax options are distributed, and files an annual report with the Board of Supervisors (BOS). This option is relatively new, would likely result in MEDIC EMS becoming a county department, in order to qualify for Ground Emergency Medical Transportation (GEMT) funding too. This option has not been discussed by the MEDIC EMS Board.

Dr. Franzman asked which two counties have approved Chapter 422D. Mr. Farmer replied Warren and Wright counties; other counties are discussing moving forward with the process.

Option #2 – Reorganization to a 28E

Mr. Farmer explained this option would reorganize MEDIC under a 28E intergovernmental agreement. The agreement would be between city governments and the county with some potential cost sharing included to cover expenses. Previously, it was believed that the 28E could include a non-profit entity, such as MEDIC. However, the recommendation is to have only government organizations be a part of the 28E, and one of those governments to be the owner of the organization. The reason behind this is to be able to receive federal GEMT revenue as allowed by the Iowa legislature. GEMT is a federally-funded supplement to state Medicaid payments to EMS providers transporting Medicaid patients. Mr. Farmer explained the State is most comfortable if a single municipality is applying for the GEMT reimbursements. The 28E option has been previously evaluated and approved by the MEDIC EMS Board, but that was prior to the introduction of GEMT funds and the stipulations to receive those reimbursement dollars.

Option #3 – Remain a 501(c)(3) Non-Profit Ambulance Service

Mr. Farmer shared that in this option, MEDIC EMS would remain status quo. The GEMT reimbursements would not be an option and uncertain revenue streams threaten the continued viability of the service. The continued survival as an independent 501(c)(3) is entirely uncertain.

Option #4 -MEDIC EMS Dissolves

Mr. Farmer shared if MEDIC EMS dissolves in the future, the question of how to provide ambulance service would return to each municipality, the BOS, and the BOH. While EMS is not an essential service in Iowa Code like fire and law enforcement, the public sees it that way, and expects someone to come when they call 9-1-1 for a hospital transport. Mr. Farmer added, if MEDIC EMS was to dissolve, the question of how nonemergency transports would be handled would also need to be addressed. The goal in having these conversations now is to develop a long-term, sustainable solution which prevents Option #4 for occurring.

Mrs. Thoreson added the BOH has authority in setting policy. Chapter 28 outlines the service areas and expectations for providers. Chapter 28 was approved by the BOH and then the BOS.

Mrs. Frederiksen shared on April 12th she presented at the Scott County BOS Committee of the Whole meeting and April 18th she was invited to the Bettendorf City Council, Committee of the Whole meeting. Mrs. Frederiksen requested to present at the April 18th Davenport City Council meeting but was declined at this time.

Dr. O'Donnell asked how many paramedics are trained each year.

Mrs. Frederiksen reported she did not have the number readily available, but the number of licensed professionals in the state of Iowa is declining. The decline is due to retirements and decreased interest in pursuing the profession. Mrs. Frederiksen was excited to share they currently have 13 EMTs in paramedic programs that will be completed in May/June.

Dr. O'Donnell summarized that it appears a majority of the calls MEDIC EMS run are 9-1-1 calls, and that is where a majority of the revenue needs to be made. Dr. O'Donnell stated that it appears Option #3 and Option #4 are not a good solution. Dr. O'Donnell asked if the MEDIC EMS Board of Directors has made an updated recommendation since 2018-2019.

Mrs. Frederiksen shared they have an upcoming Board meeting in May and she is unsure if they have diverged off their prior 28E recommendation, but feels the Board does have an understanding there is a need for governmental streamed funding for continued survival.

Dr. Hanson stated it is her understanding a 28E and 422D are not mutually exclusive. One step may lead into the next step.

Mr. Farmer stated they can both work together. Mr. Farmer explained that taking a tax levy to the public is not something that can be done overnight. The intermediary step could be government ownership of an ambulance service with other associate governments contributing, which would be a 28E agreement. Mr. Farmer noted that Scott County,

Davenport, Bettendorf and the other small municipalities in Scott County do not have unlimited tax levies. Therefore, working forward, in the future, the most secure situation is to have a dedicated tax levy for EMS which is the 422D. Step one would be ownership of medical services by a governmental entity, step two is other member governments begin contributing towards the same effort thru a 28E agreement, and step three is to gain long-term sustainability thru Iowa Code 422D. This could be a multistep process over the next 3, 5 or 10 years.

Dr. O'Donnell noted through the years (80's) other services have wanted to challenge/compete with MEDIC EMS. Dr. O'Donnell asked if by changing and going thru the steps as outlined if it would allow another entity to come in and provide the same service.

Mr. Farmer responded that would be a question the attorneys would need to address.

Dr. Hanson added, should another ambulance service want to present themselves as an applicant, the Scott County Health Department would need to license the entity and in order to do so they would need to meet the criteria of Chapter 28.

Dr. Hanson noted Chapter 28, SEC. 28-4, B. Licenses:

2. Licenses shall be issued only when it is determined that:

b. Currently licensed services' emergency response capability will remain viable with the addition of the emergency medical service.

Dr. Hanson added, due to the criteria outlined in Chapter 28, the BOH would need to assure that any new applicants would not put a current service in jeopardy.

Dr. Franzman asked if lobbying efforts have been done with legislators to address the Medicaid funding.

Mrs. Frederiksen responded that lobbying is done yearly, but is an area that all partners need to strengthen their efforts.

Dr. Hanson shared that the discussion of the sustainability of a strong, efficient EMS system will be taking place in many venues on the approach/model that is best for Scott County. In the meantime, Dr. Hanson asked the BOH to keep themselves knowledgeable on how MEDIC EMS is operating and to keep themselves knowledgeable on how the various communities see this as important or essential.

Dr. O'Donnell asked if Mrs. Frederiksen was given a reason from the Davenport City Council declining her request to present at their April 18th meeting.

Mrs. Frederiksen replied she was not given a reason.

Dr. Hanson called for a motion to accept the reports. Dr. O'Donnell moved to approve the reports. Motion seconded by Dr. Franzman. Motion carried unanimously.

Dr. Hanson moved to Public Comment.

There were no comments.

Dr. Hanson moved to Unfinished Business.

There were no items for Unfinished Business.

Dr. Hanson moved to New Business.

Mrs. Barnes provided an overview of the Fiscal Year 2022 – 3rd Quarter Performance Measures/Budgeting for Outcomes (BFOs). Mrs. Barnes highlighted the following:

- Critical and non-critical food establishment reinspections are being completed timely with a 9-month actual of 92%.
- The number of two-year olds seen at the department that are up-to-date on their immunizations remain low. It is a reminder that the pandemic has negatively impacted the number of children receiving their routine immunizations. The immunization team is working on strategies to get the children caught up and strategies to overcome vaccine hesitancy.
- Environmental staff is currently working on completing the sand filter septic system inspections and have begun inspections of hotels and motels.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the Community Based Program Maternal Health Grant Application, Contract, Subcontract(s), and Subsequent Amendments. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the Child and Adolescent Health and Oral Health Programs Grant Application, Contract, Subcontract(s), and Subsequent Amendments. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signatures of the Applied Practicum Experience Affiliation Agreement with St. Ambrose University's Master of Public Health Program. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the FY'23 Health Department Medical Director Agreement and Any Subsequent Amendments – Dr. Katz. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the Oral Health Integration Memorandum of Understanding with Genesis Health Group, Davenport Family Practice. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the Commercial Septic Pumper Truck Inspection Program 28E Agreement and Any Subsequent Amendments. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the Staff Education Requests. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the Amendment with FirstMed Pharmacy. Motion seconded by Mr. Robinson. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the Childhood Lead Poisoning Prevention Grant Application, Contract, and Subsequent Amendments. Motion seconded by Mr. Robinson. Motion carried.

The next meeting will be held on June 16, 2022, in the Boardroom on the 1st floor.

There being no further business before the Board, the meeting adjourned at 1:30 p.m.

Respectfully submitted,

Brenda Schwarz
Recording Secretary