



Scott County Health Department

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SCOTT COUNTY BOARD OF HEALTH

June 16, 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, Dr. Franzman, Mr. Robinson, Dr. Schermer

Staff Present: Amy Thoreson, Brooke Barnes, Briana Boswell, Nicole Miller, Lori Steiner, Andrew Swartz, Mariah Bryner, Anna Copp, Ellen Gackle, Christina McDonough, Brenda Schwarz, LaBridgette Tensley

Others Present: Diane Martens, Scott County Kids Early Childhood Iowa Coordinator

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

Dr. Hanson called for a motion to accept the minutes. Mr. Robinson moved to approve the minutes of the May 19, 2022 Board Meeting. Motion seconded by Dr. Schermer. Motion carried unanimously.

The following reports were reviewed and discussed by the Board:

A. Director's Report

Mrs. Thoreson shared Brittany Wall has been promoted as a Correctional Health Nurse from a Per Diem Nurse. Mrs. Wall started her new role on June 9th.

Mrs. Thoreson shared mental health has been one of the top community health priorities for a number of community health assessments. The Behavioral Health Coalition is leading some of the efforts in this area. Mrs. Thoreson asked LaBridgette Tensley, Maternal Child and Adolescent (MCAH) Health Consultant to speak about the Zero Suicide Initiative. Ms. Tensley explained the Zero Suicide Initiative takes a systemic and comprehensive approach that aims at preventing death by increasing community awareness and involving community members as local responders. The focus is to give individuals support and empathy by using evidence-based training, treatment, and practices while connecting them with resources in a person-centered approach. The Zero Suicide initiative is currently working towards three goals: a 1,000-day mental health awareness campaign stating, *Suicide is Preventable*; to have 100

organizations participating in the initiative from every sector; and to have 1,000 community members trained in suicide prevention with an ultimate goal of zero suicides by death by 2025.

Dr. O'Donnell asked who is the Quad Cities Open Network that staff met with to discuss the Zero Suicide Initiative as referred to in the Director's Report.

Mrs. Barnes responded it is a collaborative group that came together several years ago that is helping to spearhead the efforts of the initiative. The Scott County Health Department (SCHD) was asked to join the Zero Suicide Initiative as an organization that can help share information and evaluate the knowledge around the project and the positive impact it could have on the community.

Dr. Schermer asked if the project was a nationwide effort.

Mrs. Barnes responded the project allows each community to take the research evidence, and model it to their own community needs. The thought is if the community is doing everything right, the community would not see deaths by suicide. This would mean the proper systems and infrastructure are in place to support everything that is needed by the individual before a mental health crisis.

Mrs. Thoreson shared, that as part of the external interview team, she sat in on an interview of a potential candidate for the Iowa Department of Public Health (IDPH) Medical Director position. The interview team consisted of two individuals from local public health, one individual from the Iowa Public Health Association, and one individual from the University of Iowa College of Public Health. The team has provided interview feedback to IDPH Director, Kelly Garcia.

Mrs. Thoreson reported she has been asked to be part of the IDPH Local Public Health Iowa Disease Surveillance System (IDSS) replacement leadership group. IDSS is the record and notification system used across the state for communicable diseases. IDPH has asked several directors to be part of the leadership group to look at messaging as they build the new system to ensure the messages delivered are the messages trying to be conveyed. The state is using federal dollars they have received to replace the antiquated system, and will be looking at how they can use the new system in other programs in the future.

Mrs. Thoreson reported, that as of the meeting, IDPH reported 47,803 positive COVID-19 tests in Scott County; 30-50 cases are continuing to be reported daily. Mrs. Thoreson reminded the board that the numbers reported are undercounted due to home test kit results not being reported. Scott County hospitalization cases are continuing to be monitored carefully.

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 Iowa test kits, but the courier service to the State Hygienic Laboratory (SHL) will end on June 24th.

Mrs. Thoreson shared that the pilot project for testing wastewater for the SARS CoV-2 virus is going well. Dr. Katz is sharing the county epidemic (EPI) curves and hospitalization information with SHL, which is allowing them to do overlays.

The Food and Drug Administration (FDA) has approved the vaccine for children as young as 6 months. The Advisory Committee on Immunization Practices (ACIP) is scheduled to meet June 17th – 18th. The state has allowed pre-orders of the vaccine for young children. The department anticipates vaccine could arrive in the community as early as June 20th.

Dr. Hanson asked if public health service messaging will be done.

Mrs. Thoreson shared that partners will have the vaccine available, but due to the limited amount initially coming to the community, they will be holding off on any broad marketing efforts.

B. Dr. Hanson moved to the Public Health Activity Report for the month of May 2022.

C. Dr. Hanson moved to the Budget Report for the month of May 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 shared Scott County Decategorization (DECAT) is working with the Department of Human Services (DHS) and local substance abuse providers to address the increase in meth use in the community.

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

Briana Boswell, Family Health Manager, reported staff has been focusing on developing skills related to lactation. Maggie Wright, MCAH Nurse, taught local professionals' skills for supporting lactating parents at the local Quad City Breastfeeding Coalition annual conference. Mrs. Wright attended the National Breastfeeding Conference to sharpen her lactation support skills. Staff taught lactation classes at pregnancy crisis centers in partnership with the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) Clinic.

Mrs. Boswell reported Tiffany Peterson, Community Health Manager, and staff reviewed the Local Public Health Services (LPHS) progress report template for the new work plan starting in FY'23. A similar template was created for Genesis Visiting Nurse Association to report their progress to the department, as it will feed into the department report to IDPH.

Mrs. Boswell shared Mrs. Peterson and staff attended the FY'22 regional tobacco meeting facilitated by staff from the IDPH Division of Tobacco Use Prevention and Control (TUPC). Attendees received program updates, quarterly reporting guidance, and a pop-up banner for the My Life Quit cessation program.

Anna Copp, Community Tobacco Consultant, collaborated with the Center for Alcohol & Drug Services, Inc. (CADS) Prevention Team to provide tobacco and nicotine prevention education that was heavily focused on vaping/e-cigarette use to 55 students from the Edison Academy and approximately 1,100 students from Bettendorf Middle School.

Mrs. Thoreson asked the board if they were comfortable having the information shared in the Family Health and Community Health reports incorporated in the Director's Report instead of having a separate report.

The board agreed to have the Family Health and Community Health reports incorporated in the Director's Report.

F. Dr. Hanson moved to the Board of Health Orientation – Public Health Improvement Work – Brooke Barnes, Scott County Health Department

Mrs. Barnes explained Public Health Performance Improvement work, is the positive change in public health capacity, processes, or outcomes through the use of clear and aligned planning, monitoring, and improvement activities. This work is done through the use of evidence and continuous formal activities, that strengthen public health organizations and systems, to ensure continuous improvement of our programs and services. This work takes place alongside the department's daily activities.

Mrs. Barnes shared that by spending time working together in quality improvement, performance management, health equity, communication, workforce development, workplace culture, community health assessment, and strategic planning, the SCHD is better equipped to do better in each of the programs that serve the public.

Mrs. Barnes shared that one of the most important things to know about public health improvement work is that it involves the entire department, which has been organized into the following workgroups within the department according to staff interests.

- *Performance Management* is the area which the department has the longest history of work. It is a system that involves developing standards/measures for programs, collecting data for each of the measures, using data collected to identify changes/improvements needed, and analyzing data and reporting progress. The monthly stats and quarterly indicators are the department's performance management system. At this time, the team that oversees this work is the Leadership Team.
- *Workforce Development* is the work that aims to improve health outcomes for our programs and our overall community by enhancing the training, skills, and performance of public health workers. This area of work involves an annual workforce assessment, training goals for individuals, and a workforce development plan. The team that oversees this work is the Workforce Development Committee.
- *Quality Improvement* has been a key focus for the department in recent years. It is a continuous and ongoing effort to achieve measurable improvements in the efficiency,

effectiveness, performance, accountability, outcomes, and other indicators of quality in services or processes which achieve quality and improve the health of the community. The team that oversees this work is the Quality Improvement Council which was one of the first performance improvement committees to be developed.

- *Health Equity* is one of the most needed and most challenging areas that public health departments focus their efforts. Health equity is achieving the highest level of health for all people; focusing efforts on addressing avoidable inequalities by creating fair opportunities for good health for all groups, regardless of social position or other social circumstances. Primary to health equity work is to train staff on social determinants of health, health equity, and promote looking at all of the department's work through a health equity lens. Along with training staff, the Health Equity Committee looks at ways that policies and procedures meet the needs of the community, or how they need to be improved to do so.
- *Health Promotion Team*- Communication is important to every single program the department has. Communication is the effort to inform and educate about public health issues and functions. The department has a Communication Procedure that establishes why the department communicates, when to communicate, and how it communicates. The procedure captures how a staff person is available 24/7, the methods by which the department shares information with the public, and how the department communicates during times of emergency when the department needs the public to respond accordingly. An offshoot of this communication work is the establishment of the Health Promotion Team. The focus of this team is to have a planned approach to the department's education and communication through monthly newsletters, annual reports, and topics for Facebook and the website.
- *Workplace Culture* team focuses on the culture of the department. It is the effort to ensure the SCHD has, maintains, promotes, and develops a supportive work environment. This is an area of public health improvement that continues to provide opportunities and challenges.
- *Legislative Committee* is a committee that will be formed in the future, made up of staff with an interest in guiding legislative work and helping establish a path forward. The path will likely include education and the building of a system that allows the department to monitor legislation and interact with elected officials accordingly.

Mrs. Barnes provided an overview of Public Health Accreditation, explaining that the Public Health Accreditation Board (PHAB) is a nonprofit organization dedicated to advancing the continuous quality improvement of state, local, and tribal public health departments. PHAB is working to promote and protect the health of the public by advancing the quality and performance of all public health departments in the United States through national public health department accreditation. PHAB's vision is a high-performing governmental public health system that will make the United States a healthier nation.

Mrs. Barnes explained the accreditation standards and measures that PHAB uses are built on the foundations of public health, which are the 10 Essential Public Health Services. This guides the type of work the SCHED does: assess and monitor population health; investigate, diagnose and address health hazards and root causes; communicate effectively to inform and educate; strengthen, support and mobilize communities and partnerships; create, champion and implement policies, plans and laws; utilize legal and regulatory actions; enable equitable access; build a diverse and skilled workforce; improve and innovate through evaluation, research and quality improvement; and build and maintain a strong organizational infrastructure for public health.

The SCHED became accredited in November 2018. The accreditation lasts for five years, with reports due annually.

Mrs. Barnes shared that reaccreditation is necessary for the SCHED to continue to be designated as accredited. Reaccreditation focuses on the assessment of an accredited health department's continued improvement and advancement, thereby becoming increasingly effective at improving the health of the population they serve. Mrs. Barnes explained the department is in the beginning phases of reaccreditation work and is currently in the preparation phase. Staff are reviewing site visit reports from the initial accreditation, identifying areas of improvement from the report, and completing required training modules. The reaccreditation application is due between October 1 and December 31, 2023, documentation is due June/July 2024, documentation resubmission is due August 2024, with a virtual site visit scheduled for fall/winter 2024.

Mrs. Barnes shared staff will keep the board informed of the reaccreditation process by providing updates at the Board of Health meetings and with a newsletter, *The Sequel*.

Mrs. Hanson was interested if the accreditation momentum was able to be sustained during COVID-19. Mrs. Hanson asked how many organizations are accredited nationally.

Mrs. Barnes did not have the number readily available but noted as the PHAB quarterly update is received, more organizations are moving through the process.

Mrs. Hanson asked how many organizations are accredited in Iowa.

Mrs. Thoreson shared Siouxland District Health Department and Black Hawk County Health Department have achieved accreditation since the SCHED reached accreditation.

Mrs. Hanson asked how many organizations have moved thru the reaccreditation process.

Mrs. Barnes shared that she has not heard of many organizations that initially received accreditation and have not chosen to move thru the reaccreditation process.

Mrs. Hanson asked what the financial commitment is.

Mrs. Thoreson shared the financial commitment is approximately \$9,000/year to maintain accreditation. Staff anticipates it will remain the same as the department moves into reaccreditation.

Mrs. Hanson asked if staff have seen where accreditation makes a difference in terms of grant applications.

Mrs. Barnes responded that currently, the staff has not, as the funding the SCHD receives are pass-thru dollars received by the state. Mrs. Thoreson added the Centers for Disease Control and Prevention (CDC) has an addendum on many of their applications that IDPH applies for, which allows accredited organizations the advantage of not completing certain sections.

Dr. Hanson called for a motion to accept the reports. Dr. O'Donnell moved to approve the reports. Motion seconded by Mr. Robinson. 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.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the FY'23 Durant Volunteer Ambulance Authorized Agency Agreement and any subsequent amendments. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the FY'23 Humane Society of Scott County Agreement for Animal Shelter/Control Program and Animal Bite Follow-up and any subsequent amendments. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the FY'23 Chief Medical Officer for Scott County Correctional Health Services Agreement and any subsequent amendments – Dr. Posey. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the FY'23 EMS Physician's Advisory Board Medical Director Agreement and any subsequent amendments – Dr. Vermeer. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of the FY'23 Waste Commission of Scott County Agreement and any subsequent amendments. Motion seconded by Dr. Schermer. Motion carried.

Following discussion, Dr. O'Donnell moved to approve and authorize the signature of an Amendment with MEDIC EMS to extend the agreement period and association agreement amount through June 30, 2023. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Dr. Franzman moved to approve and authorize the signature of The Project of the Quad Cities FY'23 Agreement. Motion seconded by Dr. Schermer. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with the Center for Alcohol & Drug Services, Inc. Motion seconded by Dr. Schermer. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with the Center for Behavioral Health. Motion seconded by Dr. Schermer. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with Humility Homes and Services, Inc. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with Muscatine Center for Social Action. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with Rosecrance New Life Outpatient Center. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with Robert Young Center - New Horizons. Motion seconded by Dr. Franzman. Motion carried.

Following discussion, Mr. Robinson moved to approve and authorize the signature of the FY'23 HIV and Hepatitis C Testing and Prevention Agreement with Jesus Mission Church/Pearl City Outreach. Motion seconded by Dr. Franzman. Motion carried.

The next meeting will be held on July 21, 2022, in the Boardroom on the 1st floor.

There being no further business before the Board, the meeting adjourned at 1:03 p.m.

Respectfully submitted,

Brenda Schwarz
Recording Secretary