

The Fayette County Board of Health met on Tuesday, February 24, 2009 in the Public Meeting Room of the Fayette County Administrative Complex, 140 Stonewall Avenue, Fayetteville, Georgia.

Board of Health Members Present:

Thomas Faulkner, MD
Robert Horgan
Harold Logsdon
Lyn Redwood, RN, MSN
Lynette Peterson
Michael Strain, MD

Staff Members Present:

Glenda Bryant, RN, MN, FNP
Merle Crowe, BA
Rick Fehr
Hayla Hall

CALL TO ORDER: Ms. Redwood called the meeting to order at 7:05 PM.

APPROVAL OF MINUTES FROM January 13, 2009: Motion was made by Mr. Horgan to approve the minutes as written, seconded by Ms. Peterson. The minutes were unanimously approved with no further discussion.

OLD/UNFINISHED BUSINESS:

2009 FISCAL REVIEW: The board reviewed the current fiscal condition of the Fayette County Board of Health budget. Funding consists of about 48-50% patient fees, 21% County reimbursement 21%, Grant-in-Aid (GIA) and 6-7% Women, Infants and Children nutritional supplement program (WIC). Over the last several years there has been a series of funding cuts to GIA of 2-3% per year. Fiscal year 2008 the total GIA budget was \$416,991.00; FY 2009 it was reduced by a cut of \$25,228.00 to \$344,129. Four months into the year the Governor mandated a further cut of \$47,634.00, making a total cut of \$72,862.00 to GIA for Fiscal Year 2009. The overall budget shortfall for FY 2009 was \$368,476. The Governor's office stated that all state budgets would be cut by 6% in the second round of cuts FY 2009, but the cut for Fayette County Board of Health was actually 19%, due to the elimination of some nurse's salaries and reduction of proposed nurse salary increases. While the budget was cut, no mandated programs were reduced or eliminated; county population and thus demand for services continued to grow, so the workload was not reduced, but there were less and less resources to do the work. Management has cut everywhere possible while attempting to maintain services, but a little here and a little there cannot compensate for cuts of this magnitude. Efforts made to offset budget cuts were: no Cost of Living Adjustments (COLAS) were given; indeed, staff out-of-pocket cost for insurance went up so actual salaries were reduced by that increased cost; staff members who deserved promotions had those promotions delayed, and some nurses and nutritionists were reassigned to other clinics several days a month to reduce salary costs. However, those nurses and nutritionists reassigned are then not available in clinic to generate fees. This was unfortunate, but necessary to deal with GIA funding cuts. These proactive measures have meant that fee collections are slightly ahead of last year.

Ms. Redwood expressed concern that the GIA formula had not been adjusted in something like 30 years; not only had the formula and funding had failed to be adjusted to accurately reflect population upturns, but funding was actually cut. The board felt that the GIA formula should be adjusted to be fair to all counties, especially those growing in population such Fayette county. The board felt that using outdated figures was inexcusable. The letter the board approved last meeting was sent to all local representatives, and those representatives were invited to attend this Called Meeting. The only response was from Virgil Fludd, who stated that he had a previous commitment and could not attend.

Ms. Bryant thanked the board for its interest in and support of Public Health. She said that the financial crisis in State government, which had a devastating effect on local governments, did not spare Public Health: for all intents and purposes the financial implications would have far-reaching effects on Public Health. She said this board and community must collectively decide if Public Health was an essential or expendable service for Fayette County. She felt that expendable services did not include clean water, clean food, adequate sewage, disease outbreak surveillance, and basic medical care which prevented widespread disease out-break in a growing population. According to the Georgia Budget and Policy Institute, between FY 2003 and FY 2007 state funds allocated to the Division of Public Health *decreased* by 15.5%. That decrease, coupled with the population growth during that time period, equated to a per-capita state funding *decrease* of 22.6%. Add to that the current budget cut of 19% and there is a huge fiscal problem. And the same amount of cuts are expected again next year. Fayette County has enjoyed relative health success because of its economic base. According to *The Georgia County Guide* Fayette County has a very low (4th in the state) birth rate to unwed mothers, relatively low rates of infectious diseases, although Physical Health is currently following 20 patients with possible latent TB infection and 2 active cases, with a third expected any day now. We also have the 16th lowest state-wide death rate. These figures are in process of dramatically changing. There has been an approximate 16% increase in patients seen since the beginning of the year as compared to last year, probably due to economic factors. There is a growing economically disadvantaged and culturally diverse population and it is not known how the Health Department will meet the needs of that population. Some of the challenges faced are: increases in communicable disease follow-up; slower treatment of those cases and slower follow up of contacts; possible increases in childhood diseases due to the decreased availability of immunizations to the uninsured or under-insured, and increases in food-borne illness due to lack of inspection of restaurants and schools.

At this critical time in our county's history and in light of the nation's current financial crisis, funding for Public Health must not be lost, especially when the number of people seeking services are increasing. Management has instigated an ongoing process of redirecting clinical services and streamlining clinic flow to be more efficient and generate revenue. There are revenue streams that must be aggressively pursued to remain viable, but that may not be enough to stay afloat in the current economic environment. This county's healthy future is in the hands of the community, this board and our community leaders. Everyone is urged to contact their local representatives and express their concern regarding this crisis in public health, and to specifically reference current public health legislation. The board was given a list of bills currently before the house that would affect public health. Ms. Hall said that some of the pending bills would affect funding, particularly Federal funding; House Bill 351 would cause the loss of Title 10 Federal funding for the entire state if passed into law.

Ms. Redwood said she had called the Senate Budget Office and was told that \$340 million for Medicaid would be received the next day, and that money would replace some of the funding set aside for Medicaid for this year. \$1.5 billion in funding is anticipated for the next three years as part of the stimulus package. In the past, Federal funding paid 65% of Medicaid costs; as of the next day that percentage goes up to 70%. Perhaps some of the state funds set aside for Medicaid can be earmarked for public health program funding, especially GIA. She suggested that citizens who make phone calls make that request.

Mr. Fehr said that the Environmental Health (EH) department had been encouraged to contract staff out to local government agencies to attempt to reduce salary costs and help offset GIA funding cuts. He mentioned that he had attended a meeting of the 12-county EH managers and there were a few promising avenues being pursued. Contacts had been made with the Secretary of State to see if EH could contract to inspect Nail Salons. The Department of Agriculture and local municipalities had all been contacted. While in discussion with the Department of Agriculture, a bill was introduced to give EH the authority to go into food processing facilities, inspect, and report their findings to the Department of Agriculture. It is possible that the entire program would be given to EH from the Department of Agriculture, but no funding was proposed to support that change. He felt that this proposal showed confidence on the part of state legislators that EH staff could be depended upon to protect the health of the public. He mentioned the salmonella outbreak that originated in the peanut processing plant in Georgia, and said that some legislators felt that when it came to food, you were on your own. He disagreed with that statement, because of the number and level of inspections in this county and district. He was concerned about how to maintain the level of inspections, given the real possibility of staff reassignments. He referenced the danger of mosquito-borne diseases like yellow fever, malaria and West Nile Virus: saying that all are on the increase worldwide, including in the Untied States, due to international travel.

Food service inspection requirements have changed dramatically in the past 29 years. Mr. Fehr reviewed current food safety and hygiene requirements staff must follow during inspection of a food service establishment. Getting staff qualified to do inspections has become an extensive and prolonged process. Whereas staff could once be trained fairly quickly, today training is a much more difficult task. Should staff be reduced, there are only about 450 qualified environmentalists in the state of Georgia today, meaning that the job pool is very limited. He indicated that an intern who served with EH stated that she would not take a job with EH because of the job requirements VS the low pay. He mentioned that EH salaries have not increased over the years; indeed, that additional state mandated programs have been added thus increasing the workload, but with no increase in pay. One program added was Emergency Preparedness, which requires staff to be on call 24 hours a day, 7 days a week. Finding EH staff willing to take on such responsibilities with the current pay scale can be extremely difficult. Mr. Fehr and another staff member expect to retire in another 3 years, whereby 30+ years of experience will walk out the door. Mr. Fehr expressed concern that finding qualified staff to replace them would be very difficult. He quoted some articles that prove the repercussions of staff reductions of even 1%: staff turnover rapidly went up to 32% or more. Some other counties in this district have required EH staff to take one-day furloughs every month.

Mr. Fehr mentioned that when he began employment with Fayette County Board of Health clients paid no fees; now fees comprise about 48% of funding. He felt that it was

significant that funding went from 100% state and county funded to about 50% client fees, which served to show how little support the Board of Health got from the state. He mentioned that other entities also request assistance from EH: the town of Tyrone had recently invited some county employees, including Mr. Fehr, to be on their technical review committee. While he is glad to serve, there is only so much time, especially to do uncompensated service. He endorsed Ms. Bryant's request for citizens to contact their local representatives to support their local Board of Health.

Ms. Redwood asked about the potential partnership with Piedmont Fayette Hospital. Ms. Bryant replied that she had a meeting scheduled in the next few days. The board felt that it was important that citizens realize the impact that a drastic cut in health department services would have on the community. Ms. Redwood thought that citizens could ask their representatives to assign part of the Federal funding earmarked for Medicaid services to increase GIA, which gets cut year after year. Ms. Redwood felt that the state should prioritize the services it funds, and not cut funding across the board, especially for essential services like public health. She reminded the board that it might not be dramatic if a park is closed for a day, but she felt that it was dramatic if the health department had to close for a day. She asked that priority status be given to public health.

The board felt that a letter from the Board of Health such as the one sent last month would not have the same impact as phone calls from constituents who would be impacted if public health services were cut. The board thought that public health was very important and should be supported. Mr. Logsdon said that Peachtree City could postpone some non-essential services like grass-cutting, but that services provided by public health could not be put off. The board pointed out that Fayette County did not make headlines in the paper because of deaths from food-borne illness, due to the dedication of staff to food establishment inspections, for example. The board thought that Public Health had become a victim of its own success. They also commended the efforts of staff in prevention of injury and commended the overall dedication and experience of staff members. Mr. Fehr commented that there had been two documented cases of lives saved due to efforts of staff. He mentioned that public health dealt with unseen enemies, like bacteria and viruses. Fire fighters and police officers respond to incidents that have already taken place, whereas public health serves to prevent incidents. For example: food-borne illness, prevented by food establishment inspections; or disease, prevented by immunizations. Mr. Fehr said that the expression "an ounce of prevention was worth a pound of cure" was truly the case with public health and that the health department was the entire community's health department. Ms. Peterson commented that as more people are unemployed the demand for services was bound to increase.

Ms. Redwood asked how to get the GIA formula amended, and thought that it was too late this session. Any county that has had a dramatic increase in population was handicapped due to the inequitable distribution of GIA funding. Mr. Fehr commented that there were two Georgias: rural and metropolitan, and that if metro counties would band together the chances of effecting change would be increased.

PUBLIC COMMENT: Mr. Charlie King said he had been in the county 30 years and had dealt with EH quite a lot. He said that the health department had always been fair and correct. He complimented their efforts.

Debbie Britt, director of Fayette Senior Services, commented that Senior Services faced similar problems with funding as did public health. She said they wanted to support public health as much as possible and thought collaboration would be the way to go. She said she had met with Ms. Bryant and it was hoped that Senior Services and public health could work together, especially with nutrition services.

Suzanne Landis commented that she worked to support seniors in Fayette County; that membership had increased from 38 to over 2000 since the move to their new building. She felt that human services providers in Fayette County should collaborate because this issue was much too important to ignore.

Ben Nelms commented that there had been two deaths in Fayette County as a direct result of exposure to the organic phosphate pesticide discharge from the plant on Spence Road in Fulton County. He commented on Gulf War Syndrome; he said that it had just been designated a real illness, and that it was not physiological as it had been categorized for many years. He mentioned several cases of illness due to prolonged exposure to organic phosphate pesticide. He said he had visited the neighborhood affected by the discharge and had seen people on the side of the road who were sick from the green onion smell of the pesticide. He mentioned that he had contacted both EH and Ms. Hall and that he continued to monitor the public's illnesses due to that exposure. Mr. Fehr described EH's monitoring of the pesticide release and its effects on Fayette County citizens, even though EH had no jurisdiction over Fulton County. He said they had worked closely with the authorities to monitor this event.

There was no further public comment.

NEW BUSINESS: There was no new business.

Staff Reports:

There were no Staff Reports.

ADJOURNMENT: Motion to adjourn was made by Ms. Peterson, seconded by s Redwood. The motion was unanimously approved with no further discussion. The meeting was adjourned at 8:06 PM.

Michael Strain, MD, Chair

Merle Crowe
Merle Crowe, Secretary