

The Fayette County Board of Health met on Tuesday, January 13, 2009 in the Public Meeting Room of the Fayette County Administrative Complex, 140 Stonewall Avenue, Fayetteville, Georgia.

Board of Health Members Present:

Robert Horgan
Harold Logsdon
Lyn Redwood, RN, MSN
Lynette Peterson
John DeCotis, PhD

Staff Members Present:

Glenda Bryant, RN, MN, FNP
Michael Brackett, MD
Merle Crowe, BA
Rick Fehr

CALL TO ORDER: Ms. Redwood called the meeting to order at 7:32 AM.

APPROVAL OF MINUTES FROM October 14, 2008: Motion was made by Ms. Peterson to approve the minutes as written, seconded by Mr. Horgan. 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 52% patient fees, 21% County reimbursement 21% GIA and 5.6% Women, Infants and Children nutritional supplement program (WIC). Fee collections for the health department are up slightly, due to measures taken by management. Changes were made in clinic operation and staff members have been sent out to clinics in the district, which reimburse the salaries of staff members on load. These proactive measures have meant that funding is slightly ahead of last year.

Grant-in-Aid (GIA) reimbursement was cut four months into Fiscal Year 2009 by 18%, or \$47,634, due to the Governor's ordered across-the-board cut. Further cuts are expected next year. Calculation of the GIA formula has not been reviewed since the 1970s. One of the components is based on population, and Fayette County population growth has increased approximately tenfold since 1970. Ms. Redwood stated that she remembered a report that the GIA formula would be reviewed after the census report, and said to her knowledge that review had not happened. The board felt that a review would more appropriately allocate GIA funding and asked what would happen if GIA funding was refused. The impact would be a loss of some \$344,000 and mean drastic cuts in staff and services.

This cut is only the last in a series of cuts over the last few years: 2-3 percent per year over a ten year period, followed by the 19% cut this year. Management has coped with these cuts by not filling open positions; there are two positions open now at this health department. This means that mandated programs have bare-bones staff to implement them, and this is the case over the entire district. Other county health departments in this district are seriously considering staff furloughs: Carroll and Coweta County Boards of Health are considering at least one day furloughs per month.

It has repeatedly been stressed that the event of a pandemic is not a question of *if*, but *when*. Public Health is mandated to respond in the event of a health crisis, such as a flu pandemic. However, best estimates are that at least 30% of staff will not be able to come to work, due to illness or for other reasons. If public health staff is already at bare bones staffing, there will be no chance of adequate response to a crisis.

Another problem experienced by the Fayette County Health Department is the addition of state-mandated but unfunded programs. Failure to follow state mandated programs, funded or not, could mean that funding can be cut further. This means that staff can be pulled away from funded programs and dedicated to unfunded programs, or face the real possibility of funding cuts. Ms. Redwood felt that across the board cuts really were not appropriate; that health care services were critical and essential, especially during difficult economic times. She said that some government services would not have life altering consequences if reduced; health care services probably would. The board asked about the Georgia Public Health Association (GPHA) and how active it was in promoting the cause of public health. Dr. Brackett answered that it was probably the best advocate in the state. Russ Toll, MD will take over as President of GPHA and will be an excellent advocate. However, GPHA represents the entire state and that makes it difficult for it to weigh in on the GIA issue.

The board asked if Fayette Piedmont Hospital had partnered with the health department to address funding shortfalls, as had happened in other counties. Ms. Bryant said she had met with Ryan Duffey and Alice Muetzel at Fayette Piedmont Hospital. It was a preliminary meeting to discuss the possibility of partnering to address those patients who use the Emergency Room (ER) for health problems that could be dealt with at the health department. The board asked that staff meet with the Fayette Piedmont Hospital CEO and higher level staff to discuss a partnership.

Dr. Brackett said that there had not been a partnership with the hospital in Fayette County, but that he had addressed stakeholders in other counties to make them aware of the long term result of any reduction or elimination of public health services. Problems would include the spread of communicable disease such as Tuberculosis, Sexually Transmitted disease, and HIV: long term, there would be a high dollar impact on the community. Another problem would be unwanted teenage pregnancies. The result of such an unwanted pregnancy would mean that the community must then support the teen that would not be able to support herself or her child -- or other children she might have, which would probably happen; nor would she finish school. Therefore both she and her children would require community support for 25 years or more. She would never achieve the standard she would have achieved if not for the pregnancy or pregnancies.

The suggestion was made to send a letter to county and state representatives asking for a review of the way GIA funding is currently calculated. Dr. Brackett agreed that sending a letter to representatives would be very appropriate. He cautioned that other counties in the state had grown faster than Fayette, with greater discrepancies and said that these counties are also acting -- with little result. This issue is contentious because all counties have rationalizations for their resident's needs. Another suggestion was made that the board join with other county boards of health in order to have a bigger voice. Dr. Brackett agreed to provide a document regarding impact on the community if the health

department should reduce or eliminate services. This document was provided to get the message to interested parties in the community (attachment #1). The board recommended that this type information be provided to the news media, perhaps by the Risk Communicator at the district office. Another recommendation was to issue a call to action to the community. Ms. Redwood said that she had found that when constituents call their representatives it was more likely to get attention.

Motion was made to send the letter by Dr. DeCotis, seconded by Mr. Logsdon. The motion was approved unanimously with no further discussion.

PUBLIC COMMENT: There was no public comment.

NEW BUSINESS:

ELECTION OF OFFICERS: Motion was made to keep the current slate of officers by Ms. Peterson, seconded by Mr. Horgan. The motion passed unanimously with no further discussion.

ENVIRONMENTAL HEALTH REQUEST FOR JANUARY 16, 2009: Mr. Fehr requested permission to close the Environmental Health office for January 16, 2009 so that all seven staff members could attend an all-day Food Service training. Motion was made by Mr. Logsdon, seconded by Mr. Horgan. The motion passed unanimously.

Staff Reports:

Mr. Fehr discussed the Injury Control Program, which the board has supported for several years. He provided documentation of several lives that had been saved due to this program. He mentioned the efforts of staff members, who donate their time evenings and weekends. This program provides car seats and training on how to install car seats, and bicycle helmet safety. The board commended staff and recognized that the Injury Control Program is a valuable asset to the community.

Ms. Bryant updated the board, saying that about 3000 flu shots had been given, both in the office and at local schools and businesses. She said that the flu shot program had been successful this year and hoped next year would be more successful. The flu shot order had been reduced for this year because last year over 600 doses were wasted because of lack of demand.

Travel immunizations are also an excellent potential revenue source. Staff is working diligently to collect payment for services rendered. Ms. Bryant said that she had a preliminary meeting with Debbie Britt at the Fayette Senior Center to determine if a program could be developed to help with unmet basic health needs for home-bound senior citizens. Ms. Britt stated that Fayette County has a large home-bound senior citizen population. Ms. Bryant hopes that this preliminary meeting might lead to a program both useful to the community and self-supporting. She reiterated that she had spoken with Ms. Muetzel and Ms. Duffey at Piedmont Fayette Hospital and hoped there would be further meetings to get things moving. She mentioned that Piedmont Fayette had a strong emphasis on demonstrating their generosity to the community and said that partnering with the health department would be a winner for all. Ms. Bryant felt that pairing with the senior center would be a beautiful fit for public health if it could be made to work.

Dr. DeCotis thanked the health department for providing flu shots at school sites. He mentioned that there are many more home-bound seniors than people realize and that the need is dire in some cases. He said he had worked with *Meals on Wheels* and observed the need himself. He said that about 40,000 meals were delivered last year. He said that volunteers were always needed. Some homebound seniors depend on the senior center for meals, and have no one to take care of them at all.

ADJOURNMENT: Motion to adjourn was made by Mr. Logsdon, seconded by Mr. Horgan. The motion was unanimously approved with no further discussion. The meeting was adjourned at 8:04 AM.

Michael Strain, MD, Chair

Merle Crowe, Secretary