

**SOUTH CENTRAL PUBLIC HEALTH DISTRICT
BOARD MEETING
January 28, 2009**

Board Members Present:

Everett “Buck” Ward
Linda Montgomery (by phone)
Don Billings
Tom Faulkner
Angenie McCleary
Marvin Hempleman
Marypat Fields
Don Clark

District Staff Present:

Rene LeBlanc, Director
Bonnie Spencer, Deputy Director
Tom Machala, Communicable Disease and Prevention Director
Merl Egbert, Environmental Health Director
Jeff Pierson, IT Resource Manager
Amy Lierman, Public Information Officer
Caroline Dolezal, WIC Dietician and Supervisor
Kathlyn Egbert, Management Assistant

Board Members Excused:

Guests:

Russ Lively, Architect
Rachel Lowe, CSI Graphic Design Intern

Minutes

The Board of Health Meeting was called to order by Mr. Ward at 1:35 p.m.

Angenie McCleary, newly appointed Board Member from Blaine County, was welcomed and introduced to the Board. Rachel Lowe, Graphic Design Intern, was also introduced.

MOTION (made by Mr. Faulkner, second by Mr. Hempleman: “I move that we approve the minutes of the November 13, 2008, meeting.” Motion carried.

Correspondence included a thank you letter we sent to State Farm Insurance for their donation of \$900 to promote childhood immunizations in the Mini-Cassia area; a thank you letter from a client who participated in the Diabetic Screening in November at our Jerome office; and a thank you letter from the CSI Foundation for our contribution to the scholarship fund.

Legislative/Trustee Report

The draft minutes of the January 22, 2009, Trustee conference call were reviewed. Mr. Hempleman said that the Public Health District presentation to JFAC went well; questions and answers from the meeting were discussed. Mr. LeBlanc provided new information on the pending legislation for the food fee increase and next steps that may be taken.

The Reproductive Health work group is working on options of providing services as costs continue to go up and fewer funds are available to support the program. A decision will need to be made within the next six months.

The Trustees discussed canceling the IAB conference in May due to budget constraints. Most Trustees still want to hold the meeting. Our district offered to hold it in Twin Falls to cut travel and facility costs.

Weekly Trustee conference calls will continue to be held on Thursdays through the duration of the legislative session. Representative Bracket suggested that it would help our budget requests if we provide our client numbers to our legislators showing that they are going up due to economic conditions. We need to keep them apprised of our increased client load and services.

Mr. LeBlanc informed the Board of the state budget cuts in general funds, Millennium Fund, and health insurance. There will be no CEC or fund shift. He also shared a letter from the State Board of Health and Welfare in support of the food establishment legislation to increase the license fee.

A table with projected costs for the IAB conference in Kellogg (hosted by Panhandle District Health) was reviewed. For our District, it is about \$13,345. The Directors felt that during this tough economic year it would send the wrong message to the Legislature if the traditional IAB conference were held at a resort hotel in Kellogg. Directors suggested holding a business day only conference in Boise or Twin Falls. All but one of the Trustees voted to continue with plans for northern Idaho. Mr. Billings expressed that the perception is that the whole American economy requires everybody to go without “their fair share” except executives. He feels that our Board of Health should pony up and not go and do the business meeting by teleconference. Ms. McCleary and Mr. Faulkner said that they would much rather the money go towards services to clients. Consensus of all Board Members is to have Mr. LeBlanc inform the other District Directors that our Board would be glad to participate in the business meeting by teleconference, but not in person.

Administration Report

A revised smoking policy (Policy .260 Smoking on District Property) was reviewed. Smoking by employees, clients, or visitors is prohibited on district property, including all district land, facilities, and vehicles.

MOTION (made by Mr. Hempleman, second by Ms. Fields): “I move that the Board adopt the new smoking policy.” Motion carried.

The District Bylaws have been updated (last revision was in 1988). Mr. LeBlanc requested that Board Members review the Bylaws and make suggestions for improvement or give approval at the next scheduled Board meeting. One addition to the bylaws is the option of having nine Board members to include medical representation, if needed. Ms. McCleary will follow up with Dr. Curran to see if he is still interested in filling the ex-officio medical position.

Copies of budget and legislative information from the past few weeks were included in Board packets for reference. Cards with information on accessing the conference bridge were distributed.

Operations Report

Ms. Spencer reviewed the fiscal report through the end of December 2008. The report shows a \$71,805 reserve draw to balance the revenues and expenditures due to the state appropriation holdbacks. Expenditures and revenues are below the 50% of budget mark. We are beginning to see some economic impact on the counties as some contributions are in the arrears. Contract revenues are below the 50% level but will hopefully pick up before the end of the fiscal year; we are seeing some reductions in services and deliverables with contract amendments. Fees and donations are at 56.85% of the budget. The pass-through account balance as of the end of December is \$521,974. A proposed budget revision will be brought to the Board in February.

The Public Health Districts' cash balances report as of December 31, 2008 was reviewed. The average cash available for operations is two months (range of .3 to 2.8 months). Our District is right in the middle of the average of total cash held.

The JEPA and Diversified Board Fund Accounts Comparison report shows that the Diversified Bond Fund is outperforming the JEPA Fund with JEPA at its lowest point in years.

The Personnel Report (as of December 31, 2008) shows a decline of six positions on the books with a 1.3 decrease in total FTEs. Years of service remains stable. There were 14 expired appointments, 12 of which were resignations. We currently have four vacant positions which are being held vacant due to budgetary reasons.

Magic Software Update

The Board of Health had approved expenditures to purchase new data software to replace Magic. Jeff Pierson, IT Resource Manager, presented costs associated with this purchase along with impact on staff. First year costs of the software that made it through the RFP process were more than what was budgeted. Due to the current economic situation and the ability to deploy without affecting client services, Mr. Pierson proposed a new plan (Plan B) to upgrade our current data software with the goal of making Magic work for at least five more years. Due to recent changes by the developers of Magic allowing us to resolve current problems, it was determined that Plan B would be the best option. Internal staff will be trained to manage the development and upkeep of the system. Total cost for the first five years is estimated at \$362,861.50.

MOTION (made by Mr. Billings, second by Mr. Faulkner): "I move that we proceed with Plan B and build the cost savings into the budget revision." Motion carried

Gooding Property Development Update

Russ Lively approached the Board with complications associated with development of the property in Gooding. He presented a new site plan and updated floor plan. Access to the site is a road that is to be developed by the hospital, which is currently on hold. The sewer line will be in that road, but not the power, water, telephone ,or gas. There are no utilities available from the highway so we need to provide those someplace on the site. Mr. Lively was told by the city

that we would need to bring in an eight-inch water line and fire hydrant (cost estimate of \$27,000). The solution to the land contour issues is to elevate the floor of the facility and use the crawl space to run utilities. This would be a cost effective way to solve the problem.

The hospital development is on hold pending the sale of bonds which is delaying the installation of infrastructure. It is not feasible to continue with our facility construction until the road and utilities are available. Mr. Faulkner recommended that the district wait a couple of months to see what develops with the hospital bonds and construction. He will talk to the other Gooding County Commissioners to confirm that we can stay in our current location for a while longer.

Consensus: The Board would like Mr. Lively to put everything on hold for two or three months or until we receive further direction and information on hospital development plans.

Communicable Disease and Prevention Report

Mr. Machala gave a summary on the recent influenza vaccination season. We have about 250 doses of vaccine left. Local and national data is now showing an increase in reported influenza. We had part-time staff and student interns help with fill in during vaccination clinics due to shortages in regular staff. Special immunization clinics for 0-24 months old in the Mini-Cassia area were made available thanks to a donation from State Farm Insurance. Updates were given on the Salmonella peanut butter issue, Refugee program influx through the end of December, and nursing shortages for Family Planning clinics.

Environmental Health Report

The Environmental Health division will be conducting a “just-in-time” training on February 3 to prepare for possible food-borne illness outbreaks associated with the Special Olympics. In-house corrections were to standardize PCAs in the division (indoor air, vectors, and animal bites put under Nuisance Complaints PCA; surface water and private water programs put under Water Quality PCA).

Another protocol change involves the renewal of septic permits. In the past, people have been able to renew their permits indefinitely by paying a \$25 fee. Through the IDAPA code, we are able to put a limit on that. Clients can get an application that is good for one year, then a permit with a one time renewal.

In the past, the District has licensed and bonded a company to install septic systems. Now every installer must have a personal license or be working under someone on site who has a license. All health districts are making this change.

Community Health

Ms. Dolezal gave an update on WIC and things impacting the program. There has been an influx of refugees into the area which has increased the client caseload and requirements for language assistance. The economy has also increased the caseload, up 248 clients in one month. Every client on the program receives a \$55 food packet which generates about \$4.2 in revenue for the

grocery stores in the district during a one year period. The WIC Clinical Assistant positions are an entry level job, and there has been a hire turn-over rate. In house, WIC has created three lead Clinical Assistant positions to assume some of the responsibilities of the supervisors so they are able to see more high risk clients. Plus it gives Clinical Assistants more incentive to stay with the agency and move up.

A big changing coming up in WIC in October is a new food package implementation. The food package will be aligned with the 2005 dietary guidelines to address obesity problems. Vouchers will include fruit and vegetable instead of juice, lowfat or reduced fat milk, one dozen eggs instead of two, and whole grain products.

MOTION (made by Mr. Faulkner, second by Ms. Fields): “I move that we go into executive session as authorized by Idaho State law 67-2345 for the purpose of discussing employee issues.” Motion carried.

General session reconvened and adjourned at 4:15 p.m.



Everett “Buck” Ward
Board Chairman

Attest:



Rene R. LeBlanc, Director
Secretary to the Board

Board Minutes approved on _____ March 25, 2009