

**Ingham County Board of Health (BOH)**  
*Ingham County Health Department (ICHHD) – Conference Room C*  
Tuesday, December 4, 2018

**Minutes**

**ACTION ITEMS FOR APRIL:** None.

**In attendance for meeting:** Martha Adams, Jan Bidwell, Sugaundha Lowhim , Joel Murr, Dilhara Muthukuda, Molly Polverento, Jenn Race, Nino Rodriguez, Garry Rowe, Abby Schwartz, Lynne Stauff

The meeting was called to order at 12:01 by Vice Chair Lynne Stauff.

**Additions to Agenda:** Sanitary Code update- Garry Rowe

**Limited Public Comment:** None.

**Announcements:**

Lynne thanked Derrell for his service to the Board of Health (BOH) and wished him the best of luck in his new position as County Commissioner. Dilhara noted that Derrell would be the new Liaison for the Board of Health and the Board of Commissioners. Lynne reminded the board that there will no longer be lunches provided for BOH meetings beginning in 2019. Lynne went on to say that people should contact their representatives and to advocate for issues that they were passionate about due to "Lame Duck".

**1. Introduction/Opening Comments- Lynne Stauff**

Nino indicated that the website needed to be updated. Lynne agreed and stated that once a new board chair was elected the website would need to be updated. Lynne asked everyone to review the website to verify that their information was correct. Martha suggested that a new group photo to be taken for the website.

**2. Board of Health Leadership Nominations**

Molly, Abby, and Nino nominated Lynne Stauff for the position of Board Chair. Molly called the vote for the Board Chair position. The vote was unanimous and Lynne Stauff was voted as Board Chair.

Lynne inquired if anyone was interested in the Vice Chair position noting that Jan Bidwell had put her name in for the position. Nino Rodriguez nominated Dilhara Muthukuda for the position of Vice Chair. Dilhara accepted the nomination. Lynne asked each candidate to tell the BOAH about themselves. Jan stated that she would like to help the chair and the health department with whatever support they

needed. She also noted that she is very passionate about what Ingham County Health Department (ICHHD) does, noting that ICHHD has one of the best children's programs in the state and one of the best home visitor programs for children in the nation. She went on to mention the Opioid prevention coalition and how she would love to show what types of programs ICHHD has. She believes that doing this would allow ICHHD to receive more funding. She noted that ICHHD has its own insurance and that she works in the jail once a week and sees the cracks in the system and she feels that she can bring that expertise to the position.

Dilhara stated that she comes from a background of evaluation and quality improvement. She likes to follow participatory evaluation and include community members in the work. Before she accepted the position on the board, she had spoken to Derrell about how the board of health interacts with the community, and what they can do to engage more with the community. The ICHHD has a strong focus on Health Equity and Social Justice (HESJ) which is an area that she is involved in at MDHHS. It is important to her that the BOH looks like the population they are serving and if the BOH does not then the BOH needs to be intentional about how they bring the missing voices to the board.

Nino mentioned that other boards have a chair, vice chair, secretary and treasurer. Molly noted that the BOH used to have a Chair, Vice Chair and a Chair Pro-tem, but when the bylaws were updated those roles were eliminated due to lack of interest. Molly further explained that the current bylaws do not prevent the creation of a new leadership position. Lynne asked if the bylaws would have to be amended again. Molly responded that the bylaws do allow for the creation of ad-hoc committees and that the bylaws could be amended. Jan suggested that the bylaws be amended to allow for a third leadership seat. Molly voiced concern about adding an additional leadership position, reminding the group that the positions had been removed in the last revision due to lack of interest. Jan suggested that the language could be changed to account for that possibility. Abby stated that she was not comfortable changing the bylaws without further discussion. Dilhara agreed with Abby that there would have to be more discussion before any changes were made. Jan said that she would like to revisit the bylaws on the executive committee.

Molly asked that the two Vice Chair candidates to leave the room. Discussion regarding the candidates ensued. The official vote was called: Jan Bidwell was elected as Vice Chair.

Nino voiced that the Board should revisit the Bylaws with the idea that a new leadership position or ad-hoc committee be created. Nino made a motion to make a new leadership role in the bylaws seconded by Molly. Molly stated that outreach was something that the board has struggled with historically. She offered her support to Dilhara for her efforts and ideas regarding outreach. Lynne stated that the board could only benefit from more community input regarding board process. She went on to say that it is a good time to add an Ad-hoc committee and appoint a future outreach chair. Nino voiced that he wanted to see young people in positions of leadership on the board.

Abby made note that the board also wanted to also revisit how many times a year they meet. Dilhara inquired about the strategic planning groups that had been in place for 2018. Lynne indicated that the groups ended at the end of 2018 and that the board needs to discuss what its plans are for the upcoming year.

The vote for opening up the bylaws to create a new position or ad-hoc committee and to review the number of times the board meets per year. The vote was unanimous and the bylaws will be re-opened.

Jan asked for volunteers to review the bylaws. Jan, Dilhara, Lynne, and Abby volunteered to review the by-laws. Molly volunteered to answer any questions regarding the history of the bylaws.

### **3. Public Health Update- Joel Murr**

Joel mentioned that the ICHD budget was approved. ICHD also submitted the application for PHAB on November 27. Dr. Lowhim offered kudos to Joel and his team for the PHAB submission. Joel noted that ICHD is seeing positive things happen internally just with the application. ICHD is waiting for the first round to be opened which will address items that were submitted that are found to be out of scope or beyond the acceptable date. ICHD will then have 30 days to resubmit the measures after that PHAB will perform a site visit. ICHD also resubmitted for our Strong Start Healthy Start grant on November 27 and the draft for the 3rd Healthy! Capital Counties was also completed. The prioritization event for Healthy! Capital Counties was held November 5 and they identified the same priorities as the previous round. The priority areas are Financial Stability, Health care access and quality, obesity, behavioral health and chronic disease. Overall ICHD and our partners can see areas where we can cooperate and look for growth.

Joel said he would schedule a time to share the findings with the board. Nino noted that Joel mentioned 5 areas and the Board is looking to restructure itself. Nino asked which of these 5 areas should the board should adapt as their new role. Lynne stated that the board should choose which of those areas they want to work on. Lynne went on to say that she would like to have a presentation at the next meeting to help quickly identify the BOH's areas of interest. Nino voiced his support about dedicating time at the next meeting to identify areas of interest that the BOH could work on. He went on to say that this year's report walks you through the process of how the priorities were identified and how they differ from last year. The report also shows how things have changed and indicates whether the priorities are improving or worsening for the region. This report ties back into having a new Community Health Improvement Plan (CHIP). Joel stated that we could tie the BOH work into the CHIP and then in the summer or fall of 2019 ICHD will be creating its own strategic plan for the department. In the end ICHD will be able to tie all three elements together. Jan asked if they use the same data gathering methods and data analysis that is used for the Ingham Opioid Abuse Initiative. Joel explained that there is actually very little primary collection of data most of the data is gathered from the Census or from the Behavioral Risk Factors Survey or from MIFI. ICHD does collect data from focus groups and Photo Voice where we work with young people. This information inform the CHA.

Joel introduced the pain brochure that was created through a collaboration with IOAPI task force group. It is a great resource for patients and people in the clinics. The brochure looks at options regarding pain management, and how people should cope with pain. Joel expressed appreciation for the people who worked several hours on the editing and creation of the brochure. Lynne asked where the brochures would be shared. Joel stated that they will be shared with primary care, in the community health centers,

providers. Lynne expressed that the brochure was much needed. Joel announced that Sally Meyer would be the new Director of the Maternal Child Division. Nino noticed that McLaren Hospital was not listed on the pamphlet. Joel explained that the organizations that were listed on the brochure contributed to the cost of the printing. Lynne inquired whether or not McLaren had been a part of the collaboration, Doctor Lowhim explained that a representative from Sparrow had been there, but Sparrow is also represented by their pharmacy. Abby asked whether they had considered Medical Marijuana during the creation of the pamphlet. Molly stated that the pamphlet is very consistent with what she has seen in the offices of primary care physicians. She believes that the goal is to talk about non-medicated options for coping with pain. Dr. Lowhim mentioned that HRSA is a federally funded group and that the FQHC's are unable to have language about Medical Marijuana at this time. Dilhara asked if there were plans in the CHIP and the strategic plan for community engagement. Joel verified that community engagement was included. Lynne thanked Joel for the Public Health Update.

#### **4. Board of Health Infrastructure Update- Infrastructure work group**

Lynne discussed the infrastructure group which met November 1, 2018, the group focused on what time of the day that meetings are held and how often they meet. Abby explained that only meeting every other month makes it hard to become a cohesive group. The theory in meeting every other month is that in the off months they would be working on strategic group items. The new strategy would be to meet every month but every other month they would break into their sub groups for committee work. Jan stated that she felt strongly about building connections as a group. Jan explained that there had been discussion of having a board retreat and meeting 10 times a year skipping January and July. Molly explained that they updated the bylaws to allow for flexibility regarding meeting times and frequency. Molly expressed that meeting more frequently would be beneficial. Lynne explained that the group felt that meeting in the middle of the day was difficult. The group discussed various options for different meeting times. Abby suggested that there be a retreat held in January as a kick off for the year and then go to monthly meetings. Molly voiced that the group should reach out to Debbie Edokpolo to determine the logistics of a retreat. Abby asked that if they got Debbie's support for the retreat if the Board of Health could do a poll to determine where the retreat could take place. Molly stated that she felt that the first meeting of the year should be the first Tuesday in February. Discussion regarding the following calendar year ensued. It was decided that the first meeting will be held February 5, 2019.

#### **5. Sanitary Code Update- Garry Rowe**

Garry reported that the Sanitary Code group has been working hard and that they completed the definition portion of the code. Currently the group is on page 29 which discusses the construction of septic tanks. Two areas that were heavily discussed were the requirements of cluster systems which is where there is more than one house on the same system. The current sanitary code required that the township assumed partial responsibility for the maintenance of those cluster type systems, which can be quite an ordeal for a township to take on, although, there are several of those systems in the county. The workgroup is looking at removing the cluster system language from the sanitary code and relying upon language that the State of Michigan already has in place for cluster system maintenance. Lynne asked for details regarding the language that the State of Michigan uses. Garry explained that there is some requirement that if you are over 10,000 gallons per day then there has to be some sort of maintenance program in place in case of failure. In the past an association would take some responsibility for continued maintenance of that system or were able to call someone to have it fixed if there was a problem. Garry

further explained that there is some duplication in the State criteria which requires the same type of maintenance coverage. Instead of having it as part of ICHD's sanitary code ICHD would include it with the criteria already established by the State. Garry explained that they are unsure if the State is going to move forward with a state wide sanitary code. There has also been some discussion about keeping the Point of Sale program that we currently have or having a requirement where everyone with a septic system is inspected every ten years. Furthermore, it is now being considered that only alternative systems should have a mandatory inspection every five years. The current point of sale program includes well inspections. Garry explained that he feels that it is important to keep some sort of inspection included for the water supply. The next sanitary code meeting will be December 17. The group thanked Garry for all of the work that he has done with the sanitary code revision group.

**Meeting adjourned at 1:01 pm.**

**Next Board of Health Meeting:** 12:00 pm on Tuesday, February 5, 2018 in Conference Room C at the Ingham County Health Department, located at 5303 S Cedar Street in Lansing.