Chatham County Board of Health Meeting Minutes Monday, November 28, 2022 Dunlap Building – 80 East Street, Pittsboro, NC 27312

The Chatham County Board of Health held its monthly meeting on Monday, November 28, 2022.

Attendees

Board Members: Karen Barbee, EdD, Chair; Stephanie Freese, DVM, Vice Chair; Tammy Lloyd, MD; Carol Reitz-Barlow, MSN, RN CCRN; Marcia E. Herman-Giddens, PA, MPH, Dr PH; Judith Malone, RN; William Roscoe, OD; Franklin Gomez Flores, Commissioner; Zachary Brian, DMD, MHA

Staff: Michael Zelek, Zach Deaton, Anne Lowry, Dorothy Rawleigh, Danielle White, Bonnie Dukeman, Brenda Clegg, Zachary Horner, Michael Dunbar, Beverly Allen, Lou Ann Vasquez, Michaela McCuddy, Yvonne Moore, Casey Hilliard

Others: Ben Rapaport, Chatham News + Record; Jen Medearis Costello, Stephanie Terry, and Alicia Bailey, Save the MCC Coalition

Welcome, Call to Order, and Introductions

Dr. Barbee called the meeting to order at 6:00 p.m.

Anne Lowry, Environmental Health Director, introduced two new members of the Environmental Health division. Michael Dunbar is a new environmental health specialist, and Shvaughn Ross has transferred from the Community Alternatives Program to be an environmental health specialist in food and lodging.

Zach Deaton, Clinical and Community Health Services Director, stated that Minerva Perez has transitioned from receptionist to a Foreign Language Interpreter.

Bonnie Dukeman, Public Health Nurse Supervisor, introduced Yvonne Moore, the clinic's new Family Planning program nurse coordinator.

Conflict of Interest

Commissioner Flores referenced that he is on the Board of Commissioners, and Ms. Reitz-Barlow stated that she works for UNC Health.

Approve Agenda

Dr. Barbee stated that the Save the MCC (Maternity Care Center) Coalition is at the meeting to give a presentation, which they requested last week. That presentation has been added as item VI to the agenda.

Dr. Herman-Giddens motioned to approve the agenda with the additional item, and Dr. Freese seconded the motion. The motion passed unanimously.

Consent Agenda

Dr. Freese made a motion to approve the consent agenda, and Dr. Herman-Giddens seconded the motion. The motion passed unanimously.

Public Input Session

None.

PRESENTATION FROM THE SAVE THE MCC COALITION

Michael Zelek, Public Health Director, said that the Save the MCC Coalition requested to speak to the board and Dr. Barbee and he agreed that it should be added. Mr. Zelek referenced a community task force that was organized by UNC Health, which includes Commissioner Gomez Flores, noting this is a separate group with some overlap in members. The community task force has a meeting to present recommendations next Monday.

Stephanie Terry, Director of Organizing for CORE, began speaking by saying she was here on behalf of many stakeholders in the Chatham community. She said a coalition has been formed to keep the Maternity Care Center at Chatham Hospital open because of birth outcome disparities in the community. She said the group wanted to share the progress of the Coalition and how the board can help. Ms. Terry said that 350 people had signed a petition to keep the MCC open, and she asked that the Board of Health consider signing the petition.

Jen Medearis Costello said she was a leader of EMBRACe but was at the meeting as a member of the Coalition. She said the group came together because no organization was taking the lead on seeing the MCC thrive. The MCC opened as an answer to disparities in birth outcomes in Chatham County. She said the MCC has been in trouble but is now thriving. She said since the last time the group came to the MCC, more births have occurred as hours have opened up, and doctors, patients, and outcomes tell us that is what is needed. She added that the vast majority of mothers who deliver there are people of color. She referenced that five counties in North Carolina have lost birthing centers in recent months. In those counties, she said, those hospitals made the decision without sharing the information with the public. Those decisions were opposed in those counties. She said what is different here is that the health director and board of health know it is not inevitable that it is going to close. She said that UNC is not making a decision to prioritize moms and babies but finances. Ms. Costello said that boards of health have stepped in in other areas. In Chicago, the board of health made a statement supporting a hospital.

Alicia Bailey, WIC & Breastfeeding Programs Manager at Piedmont Health Services, said the UNC-launched task force was created without community input and through UNC internal standards. The group is asking the board to make a public statement to keep the MCC open, to read and sign the petition that has been written, and publicly advocate to keep the MCC open.

She said that with all the growth coming to the area, this is not the time to take away the MCC. She said the board of health is a group of experts who the commissioners will listen to.

Dr. Freese asked if there was any conflict of interest with the task force and the health department's investigation of keeping the MCC open. Mr. Zelek said the task force has members from CCPHD and a report is coming out on Wednesday from the task force. He said CCPHD is part of the task force but not convening it. Dr. Herman-Giddens asked if there was a conflict of interest with the board signing the petition. Dr. Barbee said the board members could sign the petition individually, but making a group statement would require a vote. Ms. Costello said the task force was given things to look at, but no guidance or direction. At a midpoint meeting, no one with operational decision-making authority from UNC Health came. A meeting will be held December 5 with UNC Health leadership and task force members.

Dr. Herman-Giddens asked if the hospital has shared financial numbers with folks, and Ms. Costello said no. Dr. Herman-Giddens said it is unlikely the hospital is losing money. Ms. Costello said one of the committees on the task force was a finance committee and was immediately closed when questions were asked about finances. Casey Hilliard, serving in this capacity as a member of the Coalition, said that the hospital said they lost around \$1.5 million last year. She said a task force was convened last year to develop a new financial model for Chatham Hospital and would potentially save the hospital around half a million dollars. Ms. Costello said there are some creative ways to increase volume.

Dr. Herman-Giddens referenced that Chatham is at the bottom of the state in some birth outcomes, but the racial disparity itself is shocking. She said to have the MCC close is totally unacceptable, but there should be some opportunities for publicity. Ms. Terry said this was a mission-driven initiative that would be about equity, and they hoped to garner as much attention as possible to this work. She said the group has been reaching out to other communities across the country that are facing similar issues.

Dr. Brian said there would likely be a lot of challenges related to reproductive health when the General Assembly long session opens in 2023. He encouraged the group to keep up the good work.

Lou Ann Vasquez, Communicable Disease Nurse with CCPHD, asked a question about the timeline. Ms. Costello said the community task force was given until December 15th to work because that is when they were told UNC Health was deciding. Ms. Hilliard said UNC Health was not making a public commitment on keeping it open, and not doing that would undermine the efforts to increase volume and keep staffing levels high and needed. Ms. Vasquez also asked about other counties. Ms. Costello said Central Carolina Hospital in Lee County is about to close its maternity care unit, which could possibly increase volume at the Chatham MCC. Ms. Vasquez said she lives in Lee County. She said that Chatham Hospital has been hiring and putting out bonuses for nurses for labor and delivery. Dr. Michaela McCuddy, part of the coalition, said she has been acting as the media coordinator for the coalition. She said there may be ramping up

the coalition's presence in the media. She said the media has been interested in getting different perspectives, and that having BOH members providing interviews may be helpful.

Dr. Barbee said there is a plan to issue a statement on behalf of the board. She said that signing the petition collectively would require a vote. Dr. Barbee said a statement on behalf of the board chair and the health director would not require a vote. Mr. Zelek said he would attend the upcoming meeting on Monday. He said there is no question to the value of the MCC.

Ms. Costello said the county would go back decades if the MCC was closed. Dr. Herman-Giddens said that there would be more forced pregnancies in the county if abortion is restricted. Dr. McCuddy said individual voices make a difference, but getting institutional voices increase the likelihood of success.

Dr. Lloyd said the board should completely support this effort. She said the board should write a statement. The board generally decided to wait until after the Monday meeting to see what the status was before moving forward, but was generally in favor of writing a statement and supporting keeping the MCC open.

Dr. Freese asked if waiting on the statement until the January board meet might potentially be too late. Coalition members said it would be too late. Ms. Hilliard said that the sooner UNC Health realizes people are paying attention to the issue, the better. She said that it would be best for any statement to come before the end of the year. Dr. Freese recommended that the board put together a group of board members before the meeting as a full board to draft a statement after this meeting.

Dr. Barbee said she encouraged the members to attend the meeting on Monday to help develop a statement quicker. Following that, the board would schedule a new meeting in December.

Dr. Barbee, Dr. Freese, Dr. Herman-Giddens, and Commissioner Gomez Flores all said they would plan to be at the meeting on Monday, and to meet to draft a statement. Dr. Brian said he could not attend the Monday meeting but wanted to be on the group to draft the statement.

REPORTS

Bad Debt Write-Off - Annual Report

Mr. Deaton stated the department writes off bad debt every year, including \$37,603.60 for FY 22 and \$40,278.07 for FY 19. He said bad debt write off has decreased by more than 6 percent. He said some of the debt could still possibly be collected, including FY21 \$4,339.12 from the debt set-off program. \$173,307.22 has been written off from debt set-off since 2005.

Ms. Reitz-Barlow motioned to approve the report, and Dr. Lloyd seconded the motion. The motion passed unanimously.

Communicable Disease Annual Report

Bonnie Dukeman, Lou Ann Vasquez, and Beverly Allen, Communicable Disease Nurses, presented the Communicable Disease annual report for calendar year 2021. Ms. Dukeman said nothing was really new in the report, except acute Hepatitis B was measured instead of chronic Hep B. Additionally, shigellosis, streptococcal Group A invasive, and varicella were added in 2021 as new cases. She said the high level of Rocky Mountain spotted fever remains not confirmed because many people don't get the follow-up blood work.

Related to COVID-19, Chatham County has had 16,773 cases, 128 deaths, and 34 outbreaks since March 2020. Additionally, reinfection cases started occurring in the data in October 2021. The outbreak number includes incidents not in schools but in long-term care facilities.

Ms. Dukeman said there was only one active case of tuberculosis (TB) in 2021 and 10 latent cases. One of the patients with latent TB took recommended and offered treatment. Ms. Dukeman stated that the CCPHD is not required to issue written isolation or quarantine orders for TB, and none were given during this period.

Related to rabies, there were 64 animal to human bites reported in calendar year 2021 and five reports of possible human exposure to rabies.

Related to STDs, chlamydia and gonorrhea both increased from 2020 to 2021. Ms. Dukeman said the CDC recommended a chlamydia treatment change that would require more pills over a longer period of time, and as such, it will be interesting to see how the numbers go next year. She said the clinic will sometimes use the old treatment. She added that syphilis and HIV increased.

Ms. Dukeman added that Nate Stokes has been added to the team as an infection control/preparedness nurse.

DEI Update

Brenda Clegg, Diversity, Equity, and Inclusion Officer, provided an update on advancing diversity, equity, inclusion, and belonging at CCPHD. She said she has been busy over the last four months. The position was created to make CCPHD a positive and inclusive place for staff and across the community. Among her work:

- Providing a new interview format, questions, and rubric for scoring
- Participating in panel interviews
- Rewording job posts
- DEI Spotlight in CCPHD newsletter
- Provided edits and language to Anti-Discrimination Policy and Diversity Policy
- Meetings with Equity Committee, Directors, and Milestone
- Formed two working groups: Personnel Working Group and Flexible Work Arrangement
- Served as mediator for open dialogue for divisions
- Establishing and maintaining community partnerships
- Providing technical expertise and training

- Evaluating new staff engagement and training platforms
- Personal development

She said that one of the major takeaways from her learning was the importance of metrics, being able to measure where we are and where we have been. She concluded her presentation by honoring Native American Heritage Month (in November) and shared seven inventions from Native Americans that revolutionized medicine and public health, including syringes, oral birth control, and sunscreen.

Dr. Brian said he gave kudos to the health department for having a position for this and providing the support for it. He asked what the key metrics were that Ms. Clegg was tracking. She referenced a staff survey last year where staff mentioned that they felt they were not heard and that things were not transparent. She said she would be looking at retention and whether or not staff felt like they could say things and feel heard and welcomed. Mr. Zelek said Ms. Clegg has exceeded all expectations for the position.

HEALTH DIRECTOR REPORT

- Mr. Zelek thanked the board for their support of his family with the birth of his new daughter, Emily. He also thanked the staff for their work keeping things running, particularly Danielle White and Anne Lowry.
- Board members were given copies of the 2021 Chatham County Community Assessment. Mr. Zelek referenced Maia Fulton-Black, who led the production of the report, and her hard work on the Assessment, and well as Zach Horner.
- Ms. Fulton-Black and other staff members have already started working on the 2022 survey, with more than 160 surveys already returned.
- The CCPHD has received its plaque noting that it has received re-accreditation with honors.
- Nate Stokes has been coordinating COVID booster and flu shot clinics through
 Mountaire and CCCC, with a couple hundred already administered. Mr. Zelek added that
 the clinic is newly offering flu shots at no cost for the uninsured utilizing Communicable
 Disease Supplement grant funds.
- The Chatham Health Alliance is having its first celebration in early December.
- The Chatham County Partnership for Children kicked off its community needs assessment, which will be completed with assistance from CCPHD staff.
- Mr. Zelek said the department has 10 positions they have requested reclassification
 with the county. This was an initiative led by the new Personnel Working Group and
 reflects the county's move out of the state's human resources system (OSHR) through a
 process called substantial equivalency.

OLD BUSINESS

None.

NEW BUSINESS

Board of Health Holiday Gathering

The board discussed holding a meeting in December related to the statement on the MCC which would also include the board's annual holiday gathering. The board decided to hold a meeting and have the gathering on Thursday, December 15th at 6 p.m.

Dr. Freese motioned for the Board of Health to host a special meeting on Thursday, December 15^{ij} , at 6 p.m. Dr. Herman-Giddens seconded the motion. The motion passed unanimously.

CLOSED SESSION

Dr. Freese motioned to move the Board into a closed session pursuant to NCGS 143- $_{31}$ β .11(A)(6). Dr. Herman-Giddens seconded the motion. The motion passed unanimously.

ren Barbee, EdD, Chair

ADJOURNMENT $_{ extstyle A}$ fer the board returned to open session, Commissioner Gomez Flores motioned to adjourn the meeting. Dr. Lloyd seconded the motion. The motion passed unanimously.

Secretary & Officio

Michael Zelek, MPH, Public Health Director



PUBLIC HEALTH DEPARTMENT

Board of Health

Resolution of the Chatham County Board of Health

Protecting Our Kids from Vaping and Nicotine Addiction

WHEREAS, the potential long-term effects of tobacco use and nicotine are well-documented, including cancer, heart disease, stroke, lung disease, diabetes, and Chronic Obstructive Pulmonary Disease (COPD); and

WHEREAS, nicotine is harmful to developing brains, and its use during adolescence can disrupt the formation of brain circuits that control attention, learning, and susceptibility to addiction; ¹ and

WHEREAS, in 2019, 12.9% of Chatham County high school students reported smoking cigarettes in the past month, and 35.0% of Chatham County high school students reported using vapor products in the past month²; and

WHEREAS, the percentage of Chatham County high school students who have ever vaped increased from 46.0% in 2017 to 53.5% in 2019²; and

WHEREAS, around 1 in 12 Chatham County high school students reported vaping every day in 2019²; and

WHEREAS, the minimum age for tobacco sales in North Carolina is 18, despite the federal minimum age being increased in 21 in 2019, and a vast majority of states (41 states as of September 2022) have followed that example³; and

WHEREAS, 95% of tobacco users start before the age of 214; and

WHEREAS, one of every five deaths in North Carolina is associated with cigarette smoking,⁵ and for each death, 30 more people are sick or live with a disability⁶; and

WHEREAS, most North Carolina young people obtain tobacco products, including e-cigarettes, from retailers. NC young people who get e-cigarettes from friends primarily get them from friends who are under 21⁷; and

WHEREAS, in a 2020 study among NC schools, a high proportion of school administrator and teacher respondents believed that e-cigarette use among students is somewhat or very problematic (91%), and that student e-cigarette use it is a somewhat or high priority issue for their school administration (90%)⁸; and

WHEREAS, having the same legal sales age at 21 for alcohol and tobacco products reduces the burden on retailers; and

WHEREAS, North Carolina is one of only 10 states in the country that does not require tobacco retailers to obtain a license or permit 9; and

WHEREAS, the North Carolina ABC Commission is capable of implementing an efficient and effective tobacco retailer permitting system based on the system also in place for alcohol retailer permitting; and

WHEREAS, establishing a retailer permitting system AND raising the minimum legal sale age to 21 will:

- Allow the state to know where tobacco products are being sold
- Improve merchant education efforts
- Allow the state to inspect for responsible retail practices
- Protect law-abiding retailers by holding non-compliant retailers accountable
- Prevent and reduce youth use of highly addictive nicotine products
- Help eliminate the use of e-cigarette and other emerging nicotine products in schools
- Reduce any confusion among retailers and consumers by having one legal sales age for state and federal law ^{10, 11}; and

WHEREAS, under the Federal Synar law, states are expected to reduce the illegal sale of tobacco products to individuals under the age of 21, and North Carolina could lose over \$4 million in annual funding from the Substance Abuse Prevention and Treatment Block Grant money, funds the state uses to pay for drug treatment, through penalties under the federal Synar amendment if sales to underage youth are too high in required annual inspections ¹²; and

WHEREAS, current North Carolina state law G.S. 14-313 preempts local authority to adopt **additional** evidence-based regulations regarding the sale, distribution, display and promotion of tobacco products ¹³; and

NOW, THEREFORE, WE, THE CHATHAM COUNTY BOARD OF HEALTH, recognizing all of the above, strongly encourage the General Assembly of the State of North Carolina to protect our kids from vaping and nicotine addiction by:

- Increasing the legal minimum age of tobacco purchase to 21 in the State of North Carolina,
- Establish, support, and provide sufficient yearly funds for a tobacco retailer permitting system,
- Remove the preemption in G.S. 14-313 to provide counties and municipalities with the authority to enact additional evidence-based regulations to lower the rate of tobacco use particularly in young people.

Adopted, this the 23rd day of January, 2023.

Karen Barbee, Chair

Chatham County Board of Health

ATTEST:

Danielle White, Clerk to the Board Chatham County Board of Health

Sources:

- U.S. Department of Health and Human Services. E-Cigarette Use Among Youth and Young Adults. A Report of the Surgeon General. Atlanta, GA: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2016.
- 2. Chatham County High School Youth Risk Behavior Survey. Chatham County Schools; 2019. (1)
- 3. Preventing Tobacco Addiction Foundation, Tobacco 21, (2021), https://tobacco21.org/.
- 4. Source: U.S. Department of Health and Human Services. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General. Atlanta: U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, 2012.
- Centers for Disease Control and Prevention. Best Practices for Comprehensive Tobacco Control Programs—2014. 2014.
 https://www.cdc.gov/tobacco/stateandcommunity/best_practices/index.htm.
- National Center for Chronic Disease Prevention and Health Promotion (US) Office on Smoking and Health. Reports of the Surgeon General. The Health Consequences of Smoking-50 Years of Progress: A Report of the Surgeon General. 2014.
- 7. CDC Foundation. North Carolina Cross-Sectional, Online Survey Summary Tables. 2021: 1-104.
- 8. Tanz, L., Heck, C., Herzig, C., Ranney, L., Herndon, S., Martin, J., Hast, M., McGowan, E., Baler, G., Shamout, M., King, B., Tynan, M., Kansagra, S. (2020). Rapid Assessment of the Impact of Ecigarettes on Schools as Reported by School Staff and E-cigarettes Confiscated by Schools North Carolina, 2019. Unpublished manuscript.
- State Tobacco Activities Tracking and Evaluation (STATE) System Licensure Fact Sheet, Ctr. For Disease Control (last reviewed: May 18, 2021), https://www.cdc.gov/statesystem/factsheets/licensure/Licensure.html#anchor 1562854161.
- 10. Preventing Tobacco Use Among Youth and Young Adults: A Report of the Surgeon General, U.S. Dept of Health and Hum. Serv. (2014), https://www.ncbi.nlm.nih.gov/books/NBK99237/pdf/Bookshelf NBK99237.pdf.
- 11. Roee L. Astor, et al., Tobacco Retail Licensing and Youth Product Use, Pediatrics (Jan. 7, 2019), https://pediatrics.aappublications.org/content/pediatrics/143/2/e20173536.full.pdf.
- 12. Revision to SAMSHSA Guidance on Tobacco Regulation, Substance Abuse and Mental Health Services Administration (June 13, 2022).
- 13. N.C. Gen. Stat. § 14-113 (2014).