

Healthy People Build Strong Communities

Kansas Association of Local Health Departments 300 SW 8th Avenue, 3rd Floor Topeka, Kansas 66603-3912 Phone: 785-271-8391

www.kalhd.org

Board of Directors Meeting Minutes March 21, 2017

Listen/view the meeting recording at: http://kalhd.adobeconnect.com/p61pv9geb0v/

Call to Order:

The March Board of Directors meeting of the Kansas Association of Local Health Departments was called to order at 10:04 a.m. on Tuesday, March 21, 2017 by Dana Rickley.

Acknowledgement of Board Members and Attendees Present:

President Dana Rickley
Secretary/Treasurer, Beth Brown
Executive Director, Michelle Ponce
Assistant Director, Heather Richardson
District 3, Pat Hunter
District 6 Alternate, Teresa Starr
Susan Belt, SEK Multi County
Sherry Angell, NCKPHI
Stefanie Landick, FHSU (student visitor)

Ed Kalas, Shawnee County HD Carl Lee, ECKPHC Mike Bear, KDHE Tom Langer, Cowley County HD Katie Mahuron, KDHE Gay Hall, Wyandotte County Jennifer Green, Riley County HD

Online Attendees:

Aften Gardner
Ashley Freeman
Chardel Hastings
Cheryl Goetz
Cindy Mullen
Darcie Van Der Vyver
Diedre Serene
Janice Powers
Jason Tiller
Karla Heble

Kay Smith
Ladonna Reinert
Laura Hageman
Leslie Pfannenstiel
Lori Eichman

Lougene Marsh Lynnette Redington Marilyn Gamblin Matt Mathies

Melissa Wachendorfer Michelle Billips Paula Bitter Paula Rowden Rayna Maddox Rhonda Sperber Rita McKoon Robin Rziha Shelly Schneider

Todd Durham

Approval of Agenda

Beth moved to approve the agenda, and Teresa seconded. The agenda was approved unanimously.

Approval of February Meeting Minutes

Beth moved to approve the February Board of Directors meeting minutes, and Paula seconded the motion. The minutes were approved unanimously.

Executive Director's Report

Read the entire report in PDF format at: http://www.kalhd.org/wp-content/uploads/2012/10/Executive- Director-Report-4.pdf

Financial Report – Beth

Beth presented the monthly financial report for March 2017. Paula motioned to approve the report, and it was seconded by Diedre. The motion passed unanimously.

PHEP Work Plan Review and Q&A with KDHE Staff

Handout: http://www.kalhd.org/wp-content/uploads/2012/10/KALHD-March-21-2017.ppt

The following is a summary of the discussion.

MB: One of the questions we have received is regarding the local health department participation in the HCC meetings. The FOA explicitly states that a local health department representative must participate in HCC meetings (Page 23 of FOA). Call-in or webinar attendance is acceptable.

TL: For LHD's who have few staff (some have 2 or fewer), can a regional coordinator represent that LHD and attend the HCC meeting?

MB: If they are an employee of the LHD, yes. Otherwise, no. I can go back to the Feds and ask their interpretation, but that's the way it is written in the FOA.

TL: Please relay back to the Federal project officers that for frontier counties, requiring the LHD director to attend the HCC meeting will shut down the health department for the time the director is out, and those individuals' boards of health will not let that occur. By participating in the PHEP program, they are putting themselves at odds with the people they serve.

MB: That's why we added the remote attendance option.

TL: Even so, that would require the LHD director to shut down the health department for the duration of the HCC meeting.

MB: It wasn't my idea. The Feds wrote it that way.

TL: As our representative, our voice, it's your responsibility to make the Feds understand this problem. Kansas is not the only state impacted by this new rule.

LP: I would like to add that in some cases, the regional coordinators are best suited to represent their respective LHD. They are subject matter experts, more versed in PHEP, and in some cases, having a director attend would not be meaningful at all.

SA: Will there be funding available for LHD's who don't already have the capability to use remote access?

MB: Yes.

TS: Can other counties within my region attend on your behalf?



MB: I will ask and get back to you.

SA: Can regional coordinators participate in just 4 HCC meetings per year? Can the meetings dates be coordinated better?

MB: One per year is acceptable. Obviously more is better. We will tweak the language to strongly encourage vou to attend as many as you can.

CL: Have we established an accounting system to document attendance in HCC meetings?

MB: If you are logged in, you are considered to be participating. HCC will manage this process.

MP: Is the HCC going to provide travel reimbursement for in-person attendance?

MB: No, the health department will pay.

DS: Will the HCC meetings be recorded?

MB: That will vary from system to system, and we don't know yet. Watching a recorded version at a later date will not count as attending.

LP: If an online attendee misses roll call, how will their attendance be confirmed?

MB: We don't know yet, but it would depend on the system they use.

MP: The frequency of HCC meetings vary across the state. Will there be guidance to help sync up the meetings?

MB: We recommend at least attending once per quarter, and changed the workplan accordingly.

MB: We will remove the mandatory regular attendance of ESF 8 or LEPC planning meetings. It is not a realistic expectation. The local health department will send a representative to the meetings when they are scheduled. We will modify the requirement of the minimum number of meetings that representatives are required to attend. Also we will delete "assure."

KH, CM, CL: Local health is still the ESF 8 lead correct? Are they required to convene the ESF 8 at least twice per year? What is the federal requirement?

MB: I will research this and get back to the group.

MB: Volunteer Survey - The FOA wants us to determine what capacity LHD's use volunteers who aren't affiliated with an existing organization like Red Cross/Salvation Army in large scale disaster or emergencies.

LP: Are we skipping over item #3 (inventory)?

MB: Yes.

LP: I do have a question for #3. How far back are we required to go?

MB: Refresh what you put in before. There's no need to go back.

SA: Can you change "verify" to "update"?



MB: Yes.

MB: PHEP and HCC Exercise capabilities don't align, so I created a crosswalk to help align them. Please review the crosswalk for this conversation: http://www.kalhd.org/wp-content/uploads/2012/10/Matrix-Domains-and-Capabilities-1.docx.

SB: This crosswalk is flawed. How far down do we have to drill down in order to get a match.

CL: Capability 1, 4 functions, 14 tasks that you don't list. Same with capability 3, 3 functions, 14 tasks that you're not listing. That's adding a tremendous amount to the process. Exercises are the heart and core of what we do and you have created a mountain of work. Core capabilities aren't listed either. This is a problem.

SB: I couldn't come up with a single way to meet all of these requirements. It would be helpful for you to tell me which activities you want me to test.

MB: The Fed's want us to test all of the capabilities. The previous KDHE PHEP staff did not enforce that requirement for years. Now we are under a microscope.

CL, GH: I disagree. I want just the functions and tasks.

CM: Will KDHE provide templates to build exercises from? Most of us do not have the expertise in designing exercises. Nor the time to develop.

TL: You will need to be prepared because this is going to spin back to you (KDHE) and will come back to you and provide a fast turnaround to approve. We are desiring to meet requirements, but when they are vague, there's a potential here for us to invest time and money only to be told that we didn't meet the requirement.

MB: I will produce a better document that lays out the details and sub bullets that we are after.

SA: We need to have a single exercise that fulfills everyone's requirements. It's not feasible to have multiple exercises because it's hard to get people to participate in a single exercise.

MB: It's great if you can include others in your exercise, but your priority should be with your public health workplan.

SB: 3 hours isn't long enough to cover the whole list. We used to be able to choose one.

MB: The process in previous years was wrong. The Federal government had said that it was wrong. Tabletop exercise is the required minimum allowed, but it can be a different exercise.

SA: It says that you must participate in at least one exercise at the local health department regional level. If a county does their exercise with these capabilities, can that be accepted?

MB: I'll have to go back and check the FOA.

CL, SB, SA: This is going to be time consuming and expensive. This is more than we have ever done in the past. We aren't exercise designers and will probably have to contract out this work.

Public Health

SB: Other 17 partners are contacting us for help. I received the copy of the Ready Reader, and it directs people to the EMS. Further, the two templates offered are not the ones we use and that's confusing to me.

MB: Rules state they must contact EM, LEPC, or ESF 8 for exercise questions. I will look at the forms and get back to you.

LR, JT: My concern at this point is that our frontier and rural counties are going to start to question "When does the administrative requirement for this grant become more burdensome that it isn't even worth taking the grant anymore?"

MB: That is something every county will have to answer for themselves.

JG: How to we document at-risk populations? The special needs population that was identified years ago?

MB: Build in your scenario that mentions the people you're looking at. I will revise that part.

BB: How many others have a Home Health and Hospice component? It's unrealistic to ask for a full-scale exercise on a yearly basis.

MB: I have no help for you.

MM: Are LHDs required to do a tabletop the first year? If not, could we do a full-scale or functional in the first year? If then we do it in the first year does that LHD have to do the statewide in BP4?

MB: The Feds are still requiring it regardless of your first year exercise.

SB: Can you open up the exercise library versus having to request access? They use to be open.

MB: The deadline for full scale exercise is November 17. I'll check on that and get back with you.

SB: We had a meeting recently, and the speaker cancelled, leaving a room full of emergency managers and public health administrators for 1.5 hours. It was an extremely eventful meeting. We decided we are going to quarterly meet with each other and we want KDEM and KDHE to attend as well so everyone can talk amongst each other.

MB: I'll check schedules and see what we can work out.

SB: HCC side requirement that coordinate attend KDHE's exercise workshop, but not on the PH side. Can you invite PH to the workshop?

MB: See the exercise training classes (#6) item. I'll see what templates we have available and send those out.

SA: Are you hiring an exercise coordinator at KDHE?

MB: Yes.

MB: We have received questions about the performance measures. I have no new information because the Feds have not released them.

Public Health

SB: This workplan indicates we submit them to you. Correct?

MB: Yes.

MB: Another question was regarding participating in the HCC quarterly meetings. This is optional, but we can change this to mandatory.

MB: Exercise questions: We are developing an FAQ for this to answer the many questions we have received.

SA: #8, use of the 'and or' when providing information to KDHE. That's very open-ended. We are concerned we will be asked to send a large amount of data to KDHE with no notice.

MB: This was worded specifically to cover the instance where the Feds ask us to provide them with additional information.

SB: Will this include a compliance review?

MB. It is for internal KDHE purposes. It should not take much time for PHEP participants to find information if we ask for it.

SB: It's not always clear what you're asking for.

MB: We will include expectation guidance and time estimate into this.

GH: Annual fit testing question: Is the training on KSTRAIN sufficient?

MB: Yes.

EK: Is FB considered a website?

MB: Excellent question. I believe so.

LP: Can we include E-notification into this?

MB: Would someone not subscribed to this still get the information?

CL: No.

MB: I will say no, based on the subscription element.

EK: 9D, Is there a definition of designated staff?

MB: No.

MP: At this point, we need to vote to either sign the concurrence letter or wait until we see the revised edited version.

Diedre motioned to wait until a revised version is submitted. Paula Rowden seconded, and the motion passed unanimously.



Cross-Jurisdictional Sharing Funding Opportunity – Jason Orr

The Center for Sharing Public Health Services is offering up to five small grants to organizations that wish to explore, plan, implement or improve some aspects of cross-jurisdictional sharing (CJS) in public health.

Proposals must fall into one of two categories: 1) Proposals focused on the implementation of a specific CJS arrangement among multiple jurisdictions, or 2) Proposals that are not linked to a specific CJS arrangement but otherwise contribute to the achievement of the Center's goals, which are described further in the <u>call for proposals</u>. Deadline is March 31, 2017. For details, go to: http://phsharing.org/technical-assistance/small-grants-2017/

FPHS Capacity Assessment – Sarah Hartsig

View Sarah's presentation here: http://www.kalhd.org/wp-content/uploads/2012/10/KALHD-Board-Meeting-3-21-2017-1.pptx

FPHS Fiscal Assessment – BERK Consultants

View Annie's presentation here: http://www.kalhd.org/wp-content/uploads/2012/10/2017_0321-Future-of-Public-Health-in-Kansas-Fiscal-Assessment_KALHD-Meeting-UPDATED-2017_0319.pdf

KDHE Updates – Katie Mahuron

- KDHE regional public health meetings will be held:
 - o April 13 Chanute
 - May 3 Hutchinson
 - o May 10 Garden City
 - o May 11 Oakley
 - o May 31 Beloit
 - o June 13 Topeka
- Monthly population health call is Tuesday, March 28 at 10 a.m.
- Governor's Public Health Conference is April 25-27, 2017. If you have trouble getting a room, please contact the conference organizer.
- Public Hearings on Medicaid expansion started yesterday and the legislature will break on April 7.
- Aid to Local applications have been received. Thank you! We are looking for feedback on your Catalyst experience. Send comments to Cristi.Cain@ks.gov.

Important Dates to Remember

- KALHD District Meetings (KSTRAIN Course #1069021)
 - o District 1 May 2
 - o District 2 April 11
 - o District 3 April 5
 - o District 4 May 19
 - o District 6 April 19

The meeting was adjourned at 2:00 p.m.

Minutes submitted by: Heather Richardson

