UTAH COUNTY BOARD OF HEALTH

151 SOUTH UNIVERSITY AVENUE
PROVO, UTAH 84601

MINUTES
May 23, 2022

Members Present:			
Jordan Singleton, Chair	X	Ryan Schooley	X
Carl Hanson, Vice-chair	excused	Shane Farnsworth	X
Gaye Ray	Phone	Ann Anderson	X
Mark Donaldson	X	Michael Kennedy	X
Amelia Powers Gardner	X	Julie Fulmer	X
Jeffrey Ogden	X		

Others present:

Eric Edwards, MPA, MCHES	UCHD Executive Director
Julie Dey	UCHD Secretary
Dr. David Flinders	UCHD Medical Director
	Number of people in attendance 18

1. Welcome by Jordan Singleton, Board of Health Chair

2. Approval of the minutes from March 28, 2022

   MOTION: Ann Anderson made the motion to approve the minutes from March 28, 2022. The motion was seconded by Julie Fullmer and passed by unanimous vote.

3. Environmental Protection Agency – Asthma EPA Award for Innovative Strategies and Partnerships to Improve Asthma Outcomes through a Comprehensive Approach

   Eric Edwards reported to the board that Andrea Jensen, our Asthma Program Coordinator, was presented with the National Environmental Leadership Award in Asthma Management on behalf of the Utah Department of Health's Asthma Program. Asthma prevention programs in Utah were recognized collectively for improving the lives of people with asthma.

Andrea Jensen resigned her position at the Utah County Health Department in May. She accepted a leadership position as the director of a national asthma educator association. She will be a great asset to asthma prevention at the national level.

4. Board Member Recognition – Dr. Michael Kennedy

   Eric Edwards explained that the Utah Association of Local Health Departments recognize individuals who have made significant contributions to public health through their local and state partnerships.

   Dr. Michael Kennedy, board member, was recognized for his contributions to public health. He works closely with Jill Parker, the Executive Director of Utah Association of Local Health Departments (the local health officers association) and the state legislature. In addition to serving as a physician in Utah county, he serves as a Utah State Senator and directs the Utah State Health and Human Services Appropriations committee.

5. Minimum Performance Standard Funding from State Legislature – Eric Edwards

   Eric Edwards reported that Dr. Kennedy was instrumental this year in supporting public health with state leaders and among the legislatures. He was instrumental in increasing funding for local health departments across the state to meet minimum performance standards. It has been decades since funding like this has been increased for meeting minimum performance standards which are set by the state legislature. This will be on-going funding that will help all local health departments better meet the needs of our residents through public health services.

6. Mosquito Abatement 2022 Presentation – Dan Miller

   Dan Miller, UCHD Program Manager, presented how the Mosquito Abatement program is an important part of Utah County public health by "promoting the health of our community by preventing avoidable disease and injury by monitoring the health of our community responding to public health emergencies and assuring conditions in which people can be healthy."

   He described how Mosquito Abatement fits into the health department's organizational mission by:

   - Controlling nuisance mosquitoes
   - Controlling mosquitoes that are vectors for diseases
   - Increasing our understanding of mosquito biology and behavior
   - Providing public education

   Dan further presented on how UCHD's Mosquito Abatement program has saved local tax dollars by seeking more efficient modes of testing, surveillance, and control (such as using a drone). He further explained how they implement Integrated Mosquito Management to

prevent pesticide resistance, increase effectiveness and safety. Please see attached slides from the PowerPoint presentation which are included with the minutes of this meeting.

7. Other Business

Amelia Powers Gardner gave a brief update on the budget for the Health Department after meeting with the finance team in the Utah County Auditor's office. This year, the County did not fund the Health Department using any County general funds. They required the Health Department to utilize the Health Department's fund balance to fund on-going operations. She explained that the fund balance might be completely depleted in 2022 which means moving into 2023 there will be a several million-dollar gap in our budget.

We will not have enough in fund balance to cover next year's ongoing operations. Additionally, she explained that the salary studies for public health and public safety have been significantly higher than in the past because of wage pressures being so high. Amelia asked Eric to meet with the auditor's department to look at what the funding looks like this year and what the trends will look like next year. This will identify what gap we can expect next year.

Amelia asked the UCHD finance team to prepare a presentation for the upcoming June 22, 2022, Commission meeting. As we head into the budgeting process, this will help everyone in the County, including the auditor's office through the Commission to be aware of any potential funding gap. We can then prepare for the shortfall as we head into the 2023 budget season.

Amelia said this is not uncommon for the County. Particularly with the pressures we are seeing through inflation, wage pressures, overall cost of goods and services from inflation and things like fuel costs. The year over year increase will be significant, and it will hit the Health Department even harder considering that in 2022 we did not use any general funds to supplement the Health Department's budget and we required the Health Department to use their fund balance (surplus) for all of it.

"As a Commissioner, I look at that going forward. As Board of Health Members, we need to be aware that we are going to have a funding gap next year that we need to look at. I like budgets to balance, and it frightens me if they don't. I want us to be aware that our budget this year did not balance. The fund balance that we typically get from the County was not available from the other Commissioners who voted to not allow that. So, we are going to be in a pretty tough spot this year. I had thought it was $4 million, but I checked, and it is actually $7 million after all of the inflationary costs and wage pressures. The end of year estimates are about $7 million. I thought we were going to have one more year before we ran out of money." Amelia explained that we will run out of fund balance (Health Department surplus) next year.

Eric said that for years his predecessors expressed concern about our growing population and that public health services are only expanding. Prior Health Officers have warned the

County Commission that utilizing a surplus fund/fund balance for ongoing operations is not sustainable and that there needs to be an investment in public health from the local community in which it serves. Another problem is that we can't keep increasing fees and create an excessive burden on restaurant owners, developers, etc. The limits to increasing fees is one of the quandaries the Health Department faces.

Eric explained that the Minimum Performance Standards funding will be a significant help but might only be a fraction of what we need. Our County needs to fund the greater amount of support required for our public health services. The UCHD Board of Health can help provide recommendations to County leadership regarding how to fund ongoing needs and operations, as well as service delivery needs that are only increasing. Every year we try to meet the expectations for services and needs of our growing population despite level funding. The level funding we do receive is basically a 'cut' because of inflation and the increased costs for goods (without a local injection of funds). This is a serious concern.

Amelia said, "The vast majority of programs require some sort of a match. Such as being 80% funded by a grant, but they need a 20% match, or they are 90% funded by a grant but they need a 10% match." This year all those matches came out of a fund balance rather than the County paying into the Health Department. "As far as I am aware (I have looked back a decade) this is literally the first time that I have ever seen that the County did not put any money into the local Health Department. I did not vote for that, but I was out voted; and I will continue to advocate for it. But I want us to recognize the level of services that we have (and we have fantastic services and I think we are very judicious with our dollars), but we literally had no buy in from the local County this year and it is not sustainable moving forward."

Eric explained, additionally we have grants as another source of revenue. Grants are limited to what they fund. We have statutorily required service mandates from the state. We need to do our duty to protect public health. We also have environmental health inspections that are also required in state code. This is just one example of dozens that we are required to complete. Grants, fees and state sources of funding cannot fund all of it.

Amelia restated the need to present to the Commission in June so that possible solutions can be brainstormed as we head into budget season. She explained that the Board of Health can play a role in supporting this need.

Eric explained that part of the presentation to the Commission will need to point out that we cannot complete all of our statutorily required public health services based on the funding we receive from the County. We do not want the County leadership and the Health Department to be forced to choose between which statutorily required services we will complete, and those we cannot due to lack of resources.

Amelia explained, we will definitely have to look at the discussion and say, "if this is not mandated or required, we may not be able to do it even if it is a good valuable service to

the community" unless we have a community that is willing to pay into the system (through taxes/general fund).

Dr. Kennedy said the state legislature will be having interim studies on state funded services and those funded with county funds. Local counties need to pay their share and not solely rely on state funds/support. If local counties don't fund it themselves, the state might stop lending their support. He pointed out that Utah County is the lowest funded county out of all the health departments in the state. Amelia emphasized that Utah County was the lowest funded county even before the County did not fund the Health Department with any general fund dollars in 2022.

Dr. Kennedy said, "We may be inducing or trying to induce some more (which I am not a fan of taxes) but if we think it is important that locals should pay for it..." {Amelia interjected} "Right, but it is not fair to have the rest of the state pay for our (services) when our local community isn't willing to. Let's work together on that..." "Let me know how I can help. So basically, we need to start the discussion that the local community needs to be paying in. We are the only local health authority that doesn't. I am willing to be an advocate for that as long as it makes sense. As long as we are continuing to have programs that make sense, then I am willing to advocate for them."

Ryan Schooley asked, "In other counties in the state, the county primarily funds the health department operations then?"

Eric answered, "As far as a comparison, Utah County would be on the bottom." Eric then explained the existence of a LHO graph that compares the per capita spent among all 13 local health departments. Summit County is way at the top at around $40, Salt Lake County is around $10, and Utah County is always at the bottom hovering at about $3 per person on any given year. We are even lower than rural counties that fund around $5 - $8 per person. There is a lot of variability." He stated, "We are proud of the fact that we have been able to do what we have over the years. We have always operated on a shoestring budget despite have a rapidly growing community." He explained, "The low level of community investment is a significant threat to the public health of Utah County residents. It is good timing for this conversation to be had."

Dr. Ogden volunteered to look at opportunities to trim costs for public health services performed by the county.

8. Utah County Health Department Communications Nixle – Aislynn Tolman Hill

Aislynn Tolman Hill, Public Information Officer, UCHD, explained that a Nixle is a text-based opt-in notification system that the health department is using to communicate with the public in times of emergency and during normal public health communications. We have worked with the Utah County Emergency Manager, Peter Quittner, for the Nixle systems which is leveraging a County system already in place with the Sheriff's department. This is

an opt-in and opt-out system. The Nixle was instrumental in communicating general Covid topics; however, what we found the most valuable was facilitating appointment scheduling for the Covid vaccine. The Nixle is also used for non-Covid based messages.

Aislynn then presented a Nixle overview to the board and gave examples of how the UCHD has been using it. Please see attached slides from the PowerPoint presentation included with the minutes of this meeting.

9. COVID-19 Consolidation Update – Eric Edwards

Eric Edwards presented the consolidation of COVID-19 response efforts being made by UCHD which include:

- COVID-19 Staff Separations (15 employees separated during the month of May)
- Remaining COVID-19 Staff utilized to help with vulnerable populations
- COVID Clinic Closures (Spanish Fork Shopko location, American Fork Alpine School District location – 500 East, Spanish Fork Fair Grounds, Saratoga Springs old Smith's location, Provo High School/BYU location, Health & Justice Building first and second floor auditorium sites.
- Integrate "lessons learned" as we update our emergency response plan

10. Utah County Health Department Annual Report Presentation -Eric Edwards

Part of minimum performance standards is to review UCHD's annual report with the board members yearly. The annual report contains all highlights for Utah County Health Department by division as well as revenues and expenditures and vital statistics. Utah County continues to be one of the healthiest counties in the nation based on:

- lifestyle of our population and how active we are,
- the low usage of tobacco and other programs designed to reduce chronic illnesses
- very young population

We want to continue to be in the top 10 of counties in the nation. We can do this by maintaining the high-quality public services that we offer to the public.

Please see attached copy of the 2021 annual report which is included with the meeting minutes.

11. Tuberculosis Program Update

At the March 28, 2022, board of health meeting, the board requested additional data for the TB program and specifically, 'What are the costs to the community?' Eric reminded the board that state code requires local health departments to have a TB program.

Dr. David Flinders, UCHD Medical Director explained to the board that of those exposed to Tuberculosis, only about 5-10% of those exposed will develop primary active TB. The other 90-95% will have latent TB which means that they have living TB germs in their body that the immune system is trying to control. The immune system cannot kill or destroy the TB bacilli. With antibiotics, we can do that. He explained that 80% of the active TB in the United States occurs in people who have had latent TB from an exposure outside of the United States and have immigrated to the United States. Only 20% of the cases of active TB come from individuals who have primary TB from exposure here in the United States.

Our target is to identify people who have immigrated to the U.S. from high-risk countries with latent TB to identify them and then to treat them with antibiotics, so they never develop active TB. This is preventative, not an intervention primarily to treat active TB and to treat people before they have active TB.

Dr. Flinders explained, we can also detect TB in anyone who applies for permanent residency in the U.S. regardless of where they come from. They are all required to have a test for TB exposure and that is where we find the majority of TB cases during our testing. Children are not usually applying for residency; they are not trying to get permanent residency in the U.S. They may seek residency 20 years later when they are graduating from high school or college. We are trying to catch the kids that are at high risk that wouldn't otherwise be tested. That is the purpose of the school test.

Dr. Flinders proposed we limit testing to countries where there is a high risk of TB. This will include some countries not on the World Health Organization list.

Ben VanNoy, Attorney, Utah County Government, said the state rule doesn't just say 'high-risk countries'; it has a whole list of high-risk people which includes the country of origin and includes other groups that may be identified that could affect public health.

(The UCHD will use the more comprehensive State DHHS threshold list to determine high risk countries.)

Please see attached Utah County Health Department Tuberculosis Program Information which is included with the minutes of this meeting.

12. Employee Changes

Please see attached employee changes which are included with the minutes of this meeting.

13. Other Business

Eric Edwards explained to the board members that there is a need for a board of health meeting in July regarding our Environmental Health program.

Ben VanNoy and Jason Garrett, Division Director, Environmental Health at UCHD explained to the board that periodically we review and update the county health regulations. The county 'Body Art' regulation has not been updated for 23 years. The body art regulation covers body piercings, tattoos, etc.

This particular regulation has some 'policy issues' and also some potentially non-health related issues. As staff of the health department, we don't feel we have the jurisdiction to propose policies for county residents. For example, some of the policies include parental consent for a minor to get tattoos, mobile body art permits, proximity of body art facilities to schools, and potential prohibitions on medical procedures such as scarification, branding, and implants into individuals; and these may be more medical related as opposed to public health related issue.

The request is to get the input of the board of health on the bigger policy related issues. The request from the Environmental Health division at UCHD is to form a subcommittee of board of health members to get their input so that we can craft an amendment to this important regulation.

The alternative would be for the Environmental Health division and the attorneys to do this if the board would like us to. However, we feel that it would be more efficient to get a subcommittee's input first.

Jason Garrett explained that UCHD's body art regulation is different than other local health departments throughout the state; and in fact, body art regulations vary widely from county to county or district to district in the state. There is no universal approach and there is no state law governing this.

The potential board of health subcommittee, again, would only work on the moral issues such as 'should parents be allowed to consent to their minors to receive body art.'

Ben VanNoy said, "We could present the issues to every board member through separate emails and receive individual input; however, we feel there would be more value to get a subcommittee together and get input. We would like to send out an email to board members and see who is interested in joining the subcommittee. Once a subcommittee is formed, we would hold a meeting in the next couple of months to receive input.

Jason Garrett explained that the health department's budget that Amelia Powers Gardner spoke to earlier in the meeting (and in total fairness) this is not a state mandated program, and it would probably be one of the first things to go in a budget cut as far as it is not a required inspection from any other entity. We need to keep this in mind before we sink a lot of resources into this. With body art for example, there are very few people that we can charge a fee to. We would never cover our costs. This is an example of how we would loose revenue.

We would like to use this new proposed board of health subcommittee model to enable us to receive input from the board on some of these issues.

MOTION: Mark Donaldson made the motion to adjourn the meeting which was seconded by Ann Anderson and passed unanimously.

Eric Edwards, MPA, MCHES
Executive Director / Local Health Officer
Utah County Health Department

Jordan Singleton
Chair
Utah County Board of Health