

A Regular Meeting of the Durham County Board of Health was held May 12, 2022 with the following members present:

Rosemary Jackson, MD; Spencer “Spence” Curtis, MPA, BS; Mary Braithwaite, MD, MSPH; James Miller, DVM; Victoria Orto, DNP, RN, NEA-BC; Anthony Gregorio, MBA; Commissioner Nida Allam and Roger McDougal, DDS; Gene Rhea, PharmD, MHA and Josh Brown

Others Present: Rod Jenkins, Rosalyn McClain, Kristen Patterson, Liz Stevens, Will Sutton, Michele Easterling, Chris Salter, Marcia Richardson, Jim Harris, Lindsey Bickers-Brock, Marissa Mortiboy, Hattie Wood, Josee Paul, Dr. Jeff Jenks, Bria Miller, Larry Lyles, Makeda Black, and Alecia Smith

CALL TO ORDER: Chair Rosemary Jackson called the meeting to order at 5:00 p.m. with a quorum present.

DISCUSSION (AND APPROVAL) OF ADJUSTMENTS TO AGENDA: DISCUSSION (AND APPROVAL) OF ADJUSTMENTS TO AGENDA: There were no adjustments or additions to the agenda.

Mr. Curtis made a motion to accept the agenda. Dr. Orto seconded the motion and the motion was unanimously approved.

REVIEW OF MINUTES FROM PRIOR MEETING/ADJUSTMENTS/APPROVAL:

Mr. Curtis made a motion to approve the minutes for April 14, 2022. Dr. Miller seconded the motion and the motion was unanimously approved.

PUBLIC COMMENTS: There were no public comments.

STAFF/PROGRAM RECOGNITION:

Mr. Rodney Jenkins, Public Health Director for Durham County Department of Public Health recognized National Nurses Week-May 6-12, 2022.

The Board applauded.

ADMINISTRATIVE REPORTS/PRESENTATIONS:

Chair Jackson called for administrative reports/presentations:

COMMUNITY HEALTH IMPROVEMENT PLANS (*Activity 9.1*)

Bria Miller, Partnership for A Healthy Durham coordinator shared the development process and final drafts of the 2022-2014 Community Health Improvement Plans.

Summary Information:

According to the Centers for Disease Control and Prevention, a community health improvement plan (or CHIP) is a long-term, systematic effort to address public health problems based on the results of community health assessment activities and the community health improvement process.

The Durham County CHIPs were developed between October 2021 and March 2022. Partnership for a Healthy Durham Coordinator Bria Miller led the process with community members and partners, using the Mobilizing for Action through Planning and Partnerships (MAPP) framework with an intentional focus on equity. CHIPs were developed around the County health priorities of affordable housing (health and housing), access to care, mental health and obesity, diabetes and food

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access. A fifth action plan was created around communications since that was defined as a need by the coalition.

Top 5 Health Priorities in Durham:

1. Affordable Housing
 2. Access to Healthcare and Insurance
 3. Poverty
 4. Mental Health
 5. Obesity, Diabetes and Food Access
- (A copy of the PowerPoint Presentation and Community Health Improvement Plan are attached to the minutes.)***

QUESTIONS/COMMENTS:

Chair Jackson: That was great Bria. It also requires a lot of work too. Just one quick question. So once you start to monitor your progress; how often do you plan to look at where you are?

Ms. Miller: At least twice a year. However within our communications committee we are developing ways for co-chairs to enter data monthly on how things are progressing.

Mr. Gregorio: Ms. Miller I do have one question. Thank you so much for your presentation. You touched on digital health. Have you run into any challenges for those who are non-natives of digital health in terms of literacy? For example, indigent populations or those who may be a little older or don't have access to mobile communication?

Ms. Miller: Absolutely. That is a huge gap that our team continue to look at and it's also why we plan to work a lot with community health workers to look at other options for connecting people. We also know "word of mouth" is effective if people would open their doors.

Mr. Jenkins: Just one additional point. I just want to say this is an award- winning process as evidence by the state recognizing the entire process that we do and deeming Durham to be one of the best in the state. I would like to have Marissa Mortiboy, Population Health Division Director to stand and be recognized for her leadership in these efforts. Next week at the Annual Public Health Leader's Conference Durham will be recognized by the state for our 2020 Community Health Improvement Plan process.

The board applauded.

PUBLIC HEALTH VACANCY REPORT (Activity 37.6)

The board received a copy of the vacancy reports through the end of April 2022 prior to the meeting. The vacancy rate for April 2022 was 17.0%.
(A copy of April 2022 Vacancy report is attached to the minutes.)

NOTICES OF VIOLATIONS (NOV) REPORT (Activity 18.2)

The board received a copy of the Environmental Health Onsite Water Protection Section NOV report through the end of April 2022 prior to the meeting.
(A copy of April 2022 NOV report is attached to the minutes.)

HEALTH DIRECTOR'S REPORT

May 12, 2022

Division / Program: Nutrition / Farmers' Market Double Bucks Program

(Accreditation Activity 10.4: The local health department shall promote and support the use of evidence-based health promotion/disease prevention strategies by other community agencies and organizations.)

Program description

- Double Bucks is a program currently running in three farmers markets in Durham, including Durham Farmers' Market (DFM), South Durham Farmers' Market (SoDuFM) and East Durham Farmers' Market (EDFM). The program helps increase access to nutritious, local food by doubling SNAP/EBT, Farmers' Market Nutrition Program Vouchers, and cash for WIC, section 8 housing participants, and SNAP customers who are out of benefits.
- DCoDPH assists with grant writing, marketing, promotion, evaluation, and technical assistance.
- In December of 2021, funds from an American Heart Association grant were secured for the expansion of the program to the Black Farmers' Market (BFM) in Durham. This funding will allow the seasonal market to start matching SNAP transactions in April 2022.

Statement of goals

- Increase access to and consumption of nutritious, local foods.
- Provide support to local farmers and the local economy.
- Support BIPOC farmers and communities.

Issues

- **Opportunities**
 - In 2021 the BFM applied to accept SNAP benefits. While this helped open the market up to a wider audience, SNAP acceptance alone did not have a large impact on revenue. Including a Double Bucks program creates better access to local foods as well as positively impacting the farmers and their business.
 - With additional marketing to partner agencies and community members, we foresee a significant increase in participation at the Durham BFM.
 - We see an opportunity to join all markets under the same funding source in the coming years. This would allow the program to run similarly across the board, which makes for easier marketing and ultimately a better understanding and usage of the program among community members.
 - SNAP overall participation has increased since the COVID-19 pandemic, therefore we predict an increase in usage at market. There has been an exponential increase in Double Bucks usage at DFM, SoDuFM, and EDFM in the past two years.

- **Challenges**

- American Heart Association and United Way of the Greater Triangle are currently funding this project for its initial year. This is the only market in Durham with a Double Bucks program not currently funded by Blue Cross Blue Shield North Carolina. This poses challenges in marketing as the programs don't have to be aligned.
- Securing additional grants or other sources of funding for future years will be imperative to allow the program to run continuously and uninterrupted. Other markets have had to pause this program in the past, and this has shown to sever

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- relationships with partner organizations and community members previously using the program.
- BFM is only open once per month during the Spring/Summer season. This makes advertising and creating new shopping habits difficult.

Implication(s)

- **Service delivery**
 - The Double Bucks program will run during the market season (April-November), second Sunday of the month from 1-4pm at Hillside High School.
 - Customers will visit the information table where their SNAP card will be scanned for the amount of their choosing, and coupons will be given to spend as cash at market, with a matching cap of \$30.
- **Staffing**
 - BFM staff will run the Double Bucks program during market hours.
 - The DINE Healthy Environments Nutritionist provides technical assistance, helps with marketing, and assists with grant writing.
- **Revenue**
 - Double Bucks provides no revenue for DCoDPH.
- **Next Steps / Mitigation Strategies**
 - Increase marketing of the BFM and overall program to eligible audiences and partner agencies.
 - Continue looking for sources of funding for future years.

Division / Program: Dental Division / Oral Health Screenings in Durham Public Schools
(Accreditation Activity 20. 1- The local health department shall collaborate with community health care providers to provide personal and preventative health services.)

Program description

- Per an MOU with Durham Public Schools, the Dental Division conducts dental screenings for children in Kindergarten and 5th grades during the school year. For schools visited by the Tooth Ferry, the hygienist will screen 1st – 4th graders as well.
- The Division also screens in Head Start programs and provides exams with fluoride in Early Head Start Programs.
- Parents are provided letters detailing the screening, and they have the option to opt-out. After the screening, parents receive a letter with the results. The letters state whether the child has or does not have caries and explains that if the child does not have a dental home the parent can call the Department of Public Health Dental Clinic to schedule an appointment.

Statement of goals

- Annual dental screenings provide indications of the prevalence of dental disease in school aged children in the County- and how Durham compares with other counties within the state.

Issues

- **Opportunities**
 - The screenings serve as a positive dental experience for students, assisting in collecting vital information to help improve children's dental health programs.

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- Children without a dental home have the chance to receive begin dental care when the Tooth Ferry visits their school and/or complete treatment in the clinic if needed.
- The screenings provide education to the students and includes oral health presentations at the school.
- The Division works with Durham Head Start and Early Head Start to provide dental screening and presentations.

Challenges

- Some schools have been hesitant to supply classroom rosters, promote the screenings, etc. which led to additional conversations with school leadership.
- There are often last-minute adjustments to the screening schedule when arriving at the schools, including finding space for the hygienist and assistant.

Implication(s)

• **Outcomes**

The Division completed dental screenings at Merrick Moore Elementary School and three Early Head Start sites in April 2022.

• **Service delivery**

The Dental Division screened 452 students at Merrick Moore Elementary Schools. The team also screened 80 children in three Early Head Start sites.

• **Staffing**

- Fariba Mostaghimi, Public Health Hygienist, completed the screening, assisted by a dental team member.

• **Revenue**

- N/A

• **Other**

- N/A

Next Steps / Mitigation Strategies

- The Division will continue to meet with school administrators to establish a screening and presentation schedule for the 2022-23 school year.

Division / Program: Population Health / Epidemiology
(Accreditation Activity 7.1: The local health department shall have epidemiological case investigation protocols in place.)

Program Description

The Omicron variant of COVID-19 hit North Carolina, along with the rest of the United States, in late December 2021. Durham County experienced a surge of cases unlike anything else seen during the previous two years. In January 2022, there were days with over 1,000 new cases with one day as high as 1,700 cases. The Durham County Department of Public Health (DCoDPH) navigated many challenges including the unprecedented case load, unexpected issues with the NC Department of Health and Human Services (NCDHHS) NCCOVID surveillance system, keeping up with packet making and case investigation needs, and preventing staff burnout. The dedication, time, and focus of DCoDPH employees made it possible for Durham County residents to rely on accurate, real-time data.

Statement of Goals

- Find solutions to get real-time data from NCCOVID for data entry and packet making

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- Prioritize Durham County COVID-19 cases for contacting based on age groups
- Maintain data quality for the Durham County COVID-19 Data Hub website
- Prevent staff burnout

Issues

• **Opportunities**

- DCoDPH COVID-19 surveillance staff came together and brainstormed ideas and encouraged each other all while maintaining positive attitudes
- Strengthened policies and procedures to streamline data entry and surveillance
- Cross trained contractors to handle multiple processes of data surveillance

• **Challenges**

- NCCOVID workflow became overwhelmed, and a solution was needed immediately to keep up with cases
 - Per NCDHHS guidance, during the first few weeks of January 2022, DCoDPH focused on age groups 65 and older and 18 and younger. As the surge continued, we shifted our priority to 18 and under only.
- The increase in case load meant an increase in packet making and case investigation.
- There was a backlog of over 20,000 cases that needed to be handled in NCCOVID and added to the DCoDPH Excel spreadsheet line list.
- Training 15+ contractors and staff to do data entry so we had to make sure everyone was aware of all the nuances to ensure data was accurate.
- With this explosion of cases and immense workload, DCoDPH needed to prevent staff burnout.

Implication(s)

• **Outcomes**

- Over 10,000 cases in the NCCOVID back log have been assigned to the proper County, deduplicated, or added to the line list and assigned back to the state for review.
- The Surveillance team should finish with the Omicron surge back log at the end of June
- The epidemiologist wrote SAS code to help identify new cases that didn't show up in the NCCOVID workflow each day for packet makers and case investigators. These cases were missing from the workflow because NCCOVID only had capacity to hold 5,000 cases in the workflow at one time. Once the case load exceeded that, the case data had to be downloaded and analyzed by the epidemiologist to streamline the case investigation process.
- The epidemiologist wrote SAS code to extract demographic data directly from NCCOVID. Prior to the surge, the Durham County Data Hub used the line list containing case information that was manually entered from packet makers and the data team. Because there were so many cases, we switched to relying on the data directly from NCCOVID to get fast, accurate, and real-time data for our Data Hub.

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- The data scientist used NCCOVID data to update the Durham County Data Hub to maintain accuracy and up to date data for Durham County residents
- The epidemiologist and data scientist built quality control measures to maintain data quality and create backups in case of technical difficulties.
- Pizza was brought in on Fridays as well as other treats like candy and pastries to keep up morale.
- **Staffing**
 - Population Health division
 - DCoDPH contractors, communicable disease staff and DCoDPH Executive Leadership
- **Revenue**
 - None
- **Next Steps/Mitigation Strategies**
 - Maintain and update Standard Operating Procedure for data entry to reference for future COVID-19 surges, clusters, . and other communicable disease outbreaks.
 - Maintain and update Standard Operating Procedures for SAS code written by the epidemiologist.
 - Create standard data entry training documents.
 - Maintain data quality control procedures.
 - Continue to build and foster all data and surveillance team relationships.
 - Continue to provide accurate, updated COVID-19 data to the public and stakeholders.

Division / Program: Population Health / Strategic Planning
(Accreditation Activity 15.1: The local health department shall develop plans to guides its work.)

Program Description:

The current Durham County Department of Public Health (DCoDPH) strategic plan was developed prior to 2020. Due to the changes in leadership, staff, and the pandemic, there was an identified need to make significant updates to the strategic plan. The project manager for quality and policy researched best practices for the strategic planning process and based on feedback from leadership it was decided that DCoDPH would follow the NACCHO strategic planning process. Staff was educated about the process in March 2022. A SWOT (Strengths, Weaknesses, Opportunities, and Threats) analysis was conducted with all staff in April 2022 virtually during a mandatory staff development day. The data that was collected will be used to prioritize goals and strategies for DCoDPH to focus on over the next five years.

Statement of goals

- Identify the agency's strengths, weaknesses, opportunities, and threats.
- Increase awareness of areas that are performing well and how we can maintain our competitive advantage.
- Increase awareness of areas that need improvements within the agency.

Issues

- **Opportunities**
 - Engage all DCoDPH staff in the strategic planning process.

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- Provide staff with the opportunity to make aware any challenges or threats that should be taken into account during the strategic plan process.
- Revisit the mission statement and vision of DCoDPH to make possible adjustments.

- **Challenges**

- Software/technical difficulties with engaging large number of staff at one time using Microsoft Teams.

Implication(s)

- **Outcomes**

- Information to analyze from staff regarding the strengths, weaknesses, opportunities, and threats
- Better understanding of the organization's strengths and how we can capitalize on opportunities

- **Staffing**

- The process for informing the strategic planning process involved leadership team and Population Health staff
- SWOT analysis involved all staff of DCoDPH during a mandatory staff development day
- Staff assisted with the facilitation of the SWOT during 10 breakout room sessions during staff development day

- **Revenue**

- None.

Next Steps / Mitigation Strategies

- Gather information from Board of Health to include with staff responses.
- Analyze information to make informed decisions for prioritization of DCoDPH goals and strategies.
- The DCoDPH strategic planning team will have their initial meeting in May 2022. The team consist of staff from all levels of the department across all divisions. The role of the team is to assist with coordinating and informing the strategic planning process (SWOT analysis, priority selection, implementation plan, monitoring and revision of strategic plan) with direction from leadership.

Division / Program: Pharmacy & Health Education / Safe Syringe Program

(Accreditation Activity 10.1 -The local health department shall develop, implement, and evaluate population-based health promotion/disease prevention programs and materials for the general public.)

Program description

- On April 2, 2018, the DCoDPH Pharmacy launched the Safe Syringe Program based on the guidance and program requirements from the NC Division of Public Health.

Statement of goals

- To offer new needles, syringes, and injection supplies to reduce the transmission of HIV and Hepatitis C in the community.
- To offer free HIV and Hepatitis C testing and follow-up care.
- To offer education, treatment information, and referrals to community members.

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- To provide a safe method of disposal for used needles and syringes.

Issues

- **Opportunities**
 - Reduce the transmission of HIV and Hepatitis C by offering new needles, syringes, and injection supplies.
 - Reduce the risk of bacterial infections (i.e. endocarditis) that occur when injection supplies are reused.
 - Connect participants with community resources including treatment options, health care, and housing assistance.
 - The following items are provided in the Safe Syringe Kit:
 - 10 sterile 1.0mL syringes with fixed needles
 - Alcohol swabs
 - Tourniquet
 - Condoms
 - Sharps Container
 - Additional injection supplies
 - Participant ID card
 - Printed material for harm reduction and ancillary services
 - Fentanyl testing strips and Naloxone kits are also offered with each SSP Kit.

- **Challenges**

- Ensure that used needles and syringes are properly discarded in a puncture proof container. Sharps containers are included with SSP Kits and participants are encouraged to use of them and return the container to the DCoDPH Pharmacy.
- Ensure that used needles and syringes are not deposited in the medication drop box in the HHS lobby.
- Bull City United was previously housed within the Department of Public Health but moved to form a separate County department for FY 21-22. BCU staff are working closely with DCoDPH staff to update all protocols to continue to distribute naloxone to program participants.

Implications

- **Outcomes**

- The following statistics have been collected for April 2022:
 - New participants: 5
 - Total contacts: 22
 - Syringes dispensed: 580
 - Syringes returned*: ~394
 - Sharps containers dispensed: 15
 - Fentanyl strips dispensed: 48
 - Naloxone kits distributed (with SSP): 17
 - Naloxone kits distributed (non-SSP): 15
 - Naloxone reversals reported: 0

*“Syringes returned” metric includes needles/syringes returned directly to staff regardless of usage (i.e. substance use, medical use, prescription use)

- **Service delivery**

- Planning and implementation were completed by the Opioid Response Committee with guidance and support

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from the NC Division of Public Health, Injury and Violence Prevention Branch.

- **Staffing**
 - Pharmacy and Health Education team members have received training from the NC Division of Public Health and the NC Harm Reduction Coalition regarding harm reduction strategies and Safe Syringe Program practices.

Next Steps / Mitigation Strategies:

- Statistics from the Safe Syringe Program will be monitored and reported to the Board of Health monthly.
- The Opioid Response Committee will continue to work with the NC Division of Public Health to improve our program and develop strategies to further our goals.
- In partnership with Durham County Emergency Medical Services (DCEMS), and Together for Resilient Youth (TRY), DCoDPH applied for a Department of Health and Human Services Substance Abuse and Mental Health Services Administration (SAMHSA) Harm Reduction Program Grant in early February. Notification is expected in mid-May, and if awarded, the grant would provide up to \$400,000 for up to three years to enhance community-wide harm reduction services, including the DCoDPH safe syringe program.

Division / Program Medical Services Division /School Health Program (Accreditation Activity 12.3-The local health department shall participate in a collaborative process to implement population-based programs to address community health problems.)

Program Description:

DCoDPH School Health Program collaborated with Amie Koch, Assistant Professor with Duke University School of Nursing, and arranged for current nursing students in their Community Health Rotation to come out and present Health Fairs at 3 Durham Public Schools (Easley, Spring Valley and Lakewood Elementary) afterschool programs on November 19, 2021 and at 5 Durham Public Schools (Easley, Spring Valley, Pearisontown, Merrick Moore and Lakewood Elementary) afterschool programs on April 8, 2022

Statement of Goals

- To collaborate with Duke University School of Nursing Students in their Community Health Rotation to create and present a diverse educational program for Durham Public School Elementary students.

Issues

- **Opportunities**
 - To provide an opportunity for the Duke Nursing Students to be able to present an educational session and interact with students on an elementary level as part of their community health learning course work.
 - To raise awareness of health topics in children ages 5-11 including: Exercise, Eating Healthy (snacks/food groups), Emotions/Self-calming techniques, Relationships (good touch-bad touch/good friends), Hygiene/Sleep
 - For Duke nursing students to deliver health education utilizing hands-on learning tools, games, and tri-fold boards

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for visual aid to promote and enhance learning through multiple senses and learning styles.

- To promote lifelong health and educational learning in elementary students interacting with older students (male and female).
- To coordinate a collaborative process with the managers of each afterschool program to set up the event, with DCoDPH Senior Public Health School Health Nurses facilitation

• **Challenges**

- Extensive coordination via phone calls and emails with the Duke professor and each afterschool manager to organize the date and logistics of the program, which was more challenging due to strict covid restrictions.
- The coordination of having all the programs on the same day after school.
- Ensuring the afterschool managers had the information they needed about the program. The afterschool managers that have had the program in previous years were very grateful to host the program again.
- Understanding the impact this educational opportunity had on students.

Implications

• **Outcomes**

- Health Fairs were successfully presented at 8 Durham Public Schools afterschool programs during the 2021-2022 school year
- Approximately 280 total Durham Public Schools students attended the Health Fairs
- Over 90 Duke University School of Nursing students were able to engage young students in health education, which will benefit all stakeholders
- This event required effective collaboration between Duke School of Nursing, afterschool managers, and DCoDPH nurses that benefits community relationships and the youngest of our county population.

• **Service Delivery**

- One Senior Public Health Nurse in the School Health Program, Kathy Kalendra, took responsibility for coordinating this event. She reached out to school administrators, after-school managers, other DCoDPH School Nurses, and the Duke University Assistant Professor. She has been the coordinator for several years.
- The Duke Nursing Student put effort and thought into provided engaging and insightful health education.

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- The Durham Public School Community Education After School Manager provided support for scheduling, space, and time for this learning opportunity.

- **Staffing**

- The event was staffed by the after-school programs at the schools. A clinical instructor from Duke and the Duke Nursing students provided the program. DCoDPH School Nurses were invited to attend the event.

Next Steps

- Ongoing communication with Amie Koch, Assistant Professor with Duke University School of Nursing for this opportunity in the future. This project has been in place now for several years and should be sustained to continue to benefit Duke nursing students, Durham Public Schools students, and Durham County Community Health.

COMMITTEE REPORTS:

There were no committee reports.

OLD BUSINESS:

- **COVID UPDATE:**

Mr. Jenkins provided the board with an update on the current COVID 19 cases and the department's surveillance and vaccine activities.

I'll start off by saying as far as our COVID-19 response we have not stopped or waived. We continue to march on like any good soldier would do. We are grateful for this period of respite so to speak but we do keep close tabs on the cases and we do recognize that they are starting to go up. However our partnership with the state tells us that we are in the process as far as messaging, letting the residents know that "we are living with COVID" and this is what it is.

We do know there is a lot of activity coming from at-home testing that is traditionally followed up by PCR testing and I'm pretty sure our medical director, Dr. Jeff Jenks is tied of me e-mailing him asking "are we okay" but in his professional opinion this is attributed to a number of things but primarily those people who are testing at home.

We know that the variants that we have circulating are not necessarily increasing hospitalizations far and wide and certainly know they are not really causing tons of deaths like we experienced with the previous variants. However, we are still concerned and still on the ready. As far as scaling down I will say we're skinning up and that is evidence by us being inside the conference room right now. For the longest time, conference rooms A, B and C have been center-stage for our vaccination efforts as evidence by some of you being with us to get your vaccinations. Since late March 2022, conference room B & C have been given back to the county for other usage. Vaccinations are still robust and I just feel the need to start with that because that's how we will get out of this pandemic. Conference room A is still being used and we have reduced our footprint when it comes to our vaccination efforts.

We were fortunate to have the national guard with us from the start and until the very last day that we could have them. I am every so grateful as a former national guardsman, as a source of pride for me, to have had them for so long before they had to demobilize and go back to their regular duties. They helped us tremendously from vaccination outreach, data input etc. They did it all and we are so very grateful.

Testing is still robust and in Durham County there is still over 30 testing sites and is widely available and is still important. We still meet with our partners to include Duke and NCCU on a monthly basis. We continue to meet with our Emergency Management partners biweekly. We continue to have a good relationship with Durham Public Schools (DPS). As I have said to many school board members, we have been in constant contact with school board leaders throughout the entire pandemic and has not stopped. We were able to provide 300 at-home tests just yesterday to DPS. We were also able to provide over 2000 at-home test to NCCU. We are doing what we do in public health which is to protect the public's health.

Once again, I just want to give a shout-out to Marissa Mortiboy and the data team; they have been on it so much so I want to say this has been the second time that we have had to have a conference call with the state of North Carolina to let them know that we don't think that their data is accurately reflecting what's going on in Durham County and that was noticed most recently with the CDC tracker which tells whether you're green or yellow. We had a meeting with them on Monday to let them know this is what we're seeing, this is what we think you guys are adhering on and some concessions were made from what I was told but nevertheless they did give us kudos with saying you guys are right. With all that being said I just want this board to know we are being responsible. We're doing the best that we can to make sure that we manage the resources that we receive from the state. We still have several pots of money that will allow us to continue to maintain our state operational readiness.

NEW BUSINESS:

- **DURHAM COUNTY EMPLOYEE WELLNESS INITIATIVE**
Dara Richardson, Human Resources Business Systems and Operations Manager provided the board with an update on the Wellness initiatives offered to Durham County Government employees.

Employee Wellness Benefits Include:

- Employee Assistance Program (EAP) 24/7 (6 free sessions)
 - Confidential Emotional Support
 - Work-Life Solutions
 - Legal Guidance
 - Financial Resources
 - On-line Support
- ComPsych EAP-Mental Health benefits (3 free sessions)
 - Mental Health counseling sessions
 - Telehealth Options
 - Therapy for non-emergency events
 - Licensed therapist for children (age 13 and up)
- Human Resource Monthly Newsletter
- Resources and Trainings for Supervisors
- Durham County Fitness Center
- Monthly Employee Appreciation Events

(A copy of the PowerPoint Presentation is attached to the minutes.)

QUESTIONS/COMMENTS:

Dr. McDougal: I have a quick question. Do you have any metrics that you can share about how well the employees are taking advantage of these resources that you are offering? Like the 6 counseling sessions?

Ms. Richardson: We can pull that data to show how many people we have taking advantage of the EAP sessions, classes and trainings. We can absolutely pull that together for you to get some metrics.

Dr. Jackson: The exercise classes are they virtual or in person?
Ms. Richardson: The exercise classes are virtual.

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• **BUDGET AMENDMENT**

The Durham County Department of Public Health request to recognize funds in the amount of \$364,074.00 from the North Carolina Department of Health and Human Services Division of Public Health, Epidemiology Section/Communicable Disease Branch.

This grant provides temporary funding to the Local Health Department (LHD) to expand communicable disease surveillance, detection, control, and prevention activities to address COVID-19 and other communicable disease-related challenges impacted by the COVID-19 pandemic.

• **AGENDA ITEMS FOR NEXT BOARD MEETING**

- Strategic Plan Update
- Tobacco Update
- Covid Update

INFORMAL DISCUSSION/ANNOUNCEMENTS:

After some discussion concerning the upcoming 500 E. Main Street parking construction project, the board decided to meet virtually for the next Board of Health Meeting on June 9, 2022.

Mr. Curtis made a Motion to adjourn into closed session pursuant To N.C.G.S. 143-381.11 (A) (3) to discuss the Health Director's FY 21-22 Performance Evaluation. Mr. Gregorio seconded the motion and the motion was unanimously approved.

Dr. McDougal made a motion to reconvene into regular session Mr. Curtis seconded the motion and the motion was unanimously approved.

Dr. Orto made a motion to adjourn the regular meeting at 6:22pm. Mr. Gregorio seconded the motion and the motion was unanimously approved.



Rosemary Jackson, MD, Chair



Rodney E. Jenkins, Public Health Director