

Board of Health Meeting

Tuesday, October 27, 2020, 9:00 a.m.
13307 Miami Lane, Caldwell, ID 83607
The meeting will be available for live streaming at the SWDH You Tube page

Public comments specific to an agenda item for the October 27, 2020 meeting can be submitted at https://www.surveymonkey.com/r/J3L6GFR. The period to submit public comments will close at 9:00 a.m. on Monday, October 26, 2020.

Agenda

A = Board A	ction Required G	=Guidance	I = Information item
9:00 A	Call the Meeting to Order		Chairman Elliott
9:02	Pledge of Allegiance		
9:03	Roll Call		Chairman Elliott
9:04 A	Request for Additional Age	enda items; Approval of Agenda	Chairman Elliott
9:05 I	Public Comments		
9:20 I	Introduction of New Emplo	oyees	SWDH Staff
9:22 A	Approve September 22, 20	020 Board of Health Meeting Mi	nutes Chairman Elliott
9:25 I	September 2020 Expendito	ure and Revenue Report	Troy Cunningham
9:35 I	Groundwater Monitoring		Brigitta Gruenberg
10:05 I	COVID-19 Situation Update	e	Doug Doney, Jaime Aanensen
10:15 I	Clinic Operations Update		Carol Julius, Clay Roscoe
10:30 I	Break		
10:45 A	SWDH COVID-19 Health Al	ert Level Update	Nikki Zogg, Rachel Pollreis
11:00	Director's Report		Nikki Zogg
	Audit Update Public Health Symposium -	- November 17, 2020 12:30 p.m	2 p.m.
11:10	Executive Session: In acco	rdance with Idaho Statute 74-20	06(b), 74-206(f)

Next meeting: Tuesday, November 17, 2020 at 9:00 a.m.



BOARD OF HEALTH MEETING MINUTES Tuesday, September 22, 2020

BOARD MEMBERS:

Georgia Hanigan, Commissioner, Payette County - present
Nate Marvin, Commissioner, Washington County - (present via Zoom)
Tom Dale, Commissioner, Canyon County - present
Kelly Aberasturi, Commissioner, Owyhee County - present
Viki Purdy, Commissioner, Adams County -- not present
Sam Summers, MD, Physician Representative - present
Bryan Elliott, Commissioner, Gem County - present

STAFF MEMBERS:

Nikki Zogg, Katrina Williams, Olivia Howard, Jaime Aanensen

Via Zoom: Doug Doney, Troy Cunningham, Clay Roscoe, Ashley Anderson, Ricky Bowman, Rachel Pollreis, Carol Julius

GUESTS: Sarah Andrade, Lifeways; Approximately 19 members of the public attending in person; Guests viewing live stream via SWDH You Tube page.

CALL THE MEETING TO ORDER

Chairman Elliott called the meeting to order at 9:09 a.m.

APPROVAL OF AGENDA

No changes to the agenda were noted.

MOTION: Commissioner Dale moved to approve the agenda as presented. Dr. Summers seconded the motion. All in favor; motion carries.

PUBLIC COMMENTS

Several members of the public presented public comments to the Board of Health members.

Southwest District Health (SWDH) does not intend to mandate COVID-19 vaccinations. Currently, six vaccines are under development. Five of them are for adults only. Southwest District Health District Director Nikki Zogg clarified if a vaccine is proven to be effective and passes through the clinical trials, SWDH will offer points of dispensing (PODs) clinics to administer the vaccination to those who wish to receive it; vaccinating high-priority groups first as determined by federal guidance.

INTRODUCTION OF NEW EMPLOYEES

New employees from Clinics Division were introduced.

APPROVE AUGUST 25, 2020 BOARD OF HEALTH MEETING MINUTES

Board members reviewed the August 25, 2020 Board of Health meeting minutes. No changes were noted.

MOTION TO APPROVE: Commissioner Dale moved to approve the August 25, 2020 Board of Health meeting minutes as presented. Commissioner Hanigan seconded the motion. All in favor; motion approved.

 Adams, Canyon,	Gem, Owyhee,	, Payette and Washington Counties	

In June 2020, the WICCC team provided 123 services, an average of 4.1 per day. In July, 280 services were provided for an average of 9.03 per day. In August, there was 448 intakes, an average of 14.45 per day, 63% higher than July. Sarah explained that some individuals check in more frequently and utilize the crisis centers as part of their safety plan to help avoid relapses. Payment for several serves has been collected through Optum and through United Health Care.

To date in September, 320 intakes have been completed, averaging approximately 14.55 per day.

SWDH COVID-19 HEALTH ALERT LEVEL UPDATE

Board members asked to review the Southwest District Health COVID-19 Health Alert Level metrics monthly. Rachel Pollreis, Research Analyst, Sr., presented updates for the Southwest District Health COVID-19 Health Alert Levels. She described current levels and where the region is trending currently.

Daily downward trend in incidence rates continue to be seen. The one metric that has been slightly altered is the positivity rate. That data are now available by county. Prior to that the district-wide positivity rate was used. Rachel explained that the incidence rate is definitely one of the most looked at metrics. She used the example of Gem County which saw an increase in incidence rate due largely to an isolated cluster outbreak in a boarding school. However, this high incidence rate did not impact the county's current health alert level because of other factors considered in the decisions (e.g., population size, congregate settings, community spread, etc.).

Board members discussed the value of the increased metrics and data being collected. Board members also discussed the difference in the health alert levels being used by other health districts. Central District Health is using fewer measures. Overall, Nikki explained that applying any of the set of measures adopted by each district would still yield the same conclusion with regard to risk for exposure and recommended mitigation strategies.

MOTION: Commissioner Hanigan made a motion to continue to utilize the health alert levels metrics and updates. Dr. Summers seconded the motion All in favor; motion passes.

DIRECTOR'S REPORT

There were no items for the Director's Report.

There being no further business, the n	neeting adjourned at 11:08 a.m.	
Respectfully submitted:	Approved as written:	
Nikole Zogg Secretary to the Board	Bryan Elliott Chairman	Date

SOUTHWEST DISTRICT HEAL BUDGET REPORT FOR SEPTEMBER 2020 (FY21)

Fund Balances	Bala	nces		
	Begi	Beginning Total:		Sept 30
General Operating Fund	·s	66,114	÷	101,679
Millennium Fund	٠Ç٠	1	·S	115,713
LGIP Operating	Ş	2,630,723		\$ 3,130,398
LGIP Vehicle Replacement	Ş	99,207	Ş	99,425
LGIP Capital	Ş	1,299,174	Ş	1,299,174 \$ 1,299,174
Total	ş	Total \$ 4.095.218 \$ 4.746.390	·V	4 746 390

787,801

her **\$ (190,760)** Net Revenue: **\$ 3,318,203**

Parents As Teacher

3,526,858 (10,793) (7,102) (190,760)

25.0%
This month
CHANGE

Year-to-Date Cash Position

Revenues: Behavioral Health Board

Carry Over:

Target

(272,362)

701,451

Expenditures: \$ (7)

Net Cash Position:

(2,616,752)

								Revenue	ine								
	Boyrd of	_			L	Env &	,	-			-						
	Board of		Admin	Clinic Services		Community	General	ıa i	Buildings	Crisis Center	e	Total	λ	TD OTA	Direct	Total Budget	Percent of
	icalui					Health	noddns								Budget		Direct
Fees	٠ \$	Ş	87	\$ 52,134	÷	117,934	\$	-	250	\$	\$	170,406	\$	417,026 \$	\$ 1,499,542	\$ 1.715.979	28%
Contracts	٠	↔	1	\$ 134,839	\$ 6	133,548	\$ 27	24,379 \$	1	\$ 86,491	91 \$	379,257	\$ 2.	2,097,435		. 4	41%
Sale of Assets	٠	Ş		- \$	↔		\$	-	1	\$	\$		Ş	-	\$ 17.477	· -0:	%5
Interest	٠ \$	↔	1	- \$	ふ	1	\$	-		\$	1	2.547		9.893			14%
District Funds	\$ 800	ۍ بې	11,696	\$ 99,443	\$	38,396	\$ 52	52,763 \$	32,242	\$	S	235,339	Ş		\$ 3.817.978	\$ 43	1
Carry-Over Funds	٠ \$	❖	1	\$ 127,835	₹.	10,793	\$	- \$		\$	· S	138,628	, S			.ب	
Other/Committed Funds	٠ \$	÷		\$ 252	\$	1	\$	\$	1	\$	· \$	252	÷ \$	+		· · · · · ·	2%
Monthly Revenue	\$ 800	\$ 0	11,784	\$ 414,503	\$	300,671	\$ 77	77,142 \$	32,492	\$ 86,491	91 \$	926,429	٠	526,857	\$ 10,560,522	\$ 12.0	33.4%
Year-to-Date Revenue	\$ 2,697	7 \$	39,518	\$ 1,266,484	₹	1,504,896	\$ 275	\$ 279,801	109,473	\$ 314,0	94 \$	314,094 \$ 3,520,922		Total	Direct budget	Total Direct budget is \$10 560 523	1
Direct Budget	\$ 15,043	3	299,905	\$ 3,878,817	7	3,036,833	\$ 1,219	1,219,147 \$	602,422	\$ 1,	55 \$	1,508,355 \$ 10,560,522	-	¢1 E2	A DEE indirect	- 13 C C C C C C C C C C C C C C C C C C	+ ,
Budget	\$ 15,043	χ. Υ.	299,905	\$ 4,724,791	ر ج	3,682,696 \$ 1,238,534 \$	\$ 1,238	8,534 \$		602,422 \$ 1,521,386 \$ 12,084,77	86 \$	12,084,777		シア・ファ	.4,433 IIIdii eC	71,724,233 IIIdii ects– 312,084,777	
Percent of Direct Budget	17.9%	%	13.2%	32.7%	%	49.6%	. •	23.0%	18.2%	20	20.8%	33.3%					

									Expenditures	litures									
Personnel	φ.		÷	12,610	\$	\$ 851,261	318,706	\$	68,427	\$ 8,030 \$	\$	4,343 \$		5 \$	607,275 \$ 1,737,711 \$ 5,920,623 \$ 6,775,177	\$ 5.920.6	73 \$ 677	5 177	29%
Operating	\$		÷	1,820	45	\$ 977,778	98,385	\$	17,541	\$ 10,326 \$	· \$	267,040		- \$ 8	858.846	\$ 4.478.408	08 \$ 5.174.800	4.800	19%
Capital Outlay	φ.	1	ς.	'	٠	1	1	4	1	5	₩.	,		٠,	20,195	. 45	1-0	184 800	13%
Monthly Expenditures	ş	1	Ş	14,430	γ.	252,934 \$	417,092	ş	85,968	\$ 18,356 \$	\$	271,382	\$	3	1,060,163 \$ 2,616,753 \$ 10,560,522 \$ 12,084,777	\$ 10,560,5	22 \$ 12.08	4.777	24.8%
Year-to-Date Expenditures	ئ	1,419	<u></u>	45,255	ᡐ	\$ 629,889	1,229,036	Ş	247,560 \$	\$ 112,087	5	292,717	Ş	2	Total	Direct hilds	Total Direct budget is \$10 560 522 ±	10 522 ±	
Direct Budget	ب	15,043	\$	299,905	٠Ņ	3,878,817 \$	3,036,833		\$ 1,219,147	\$ 602,422	₹	602,422 \$ 1,508,355 \$ 10,560,522	\$ 10,560,52	2	, C	ישה בכר ממן	\$1 E24 25E indirector \$1.000,022	1 220,00	
Budget	φ.	15,043	\$	299,905	7 \$	4,724,791 \$	3,682,696	103	1,238,534 \$		\$	602,422 \$ 1,521,386 \$ 12,084,77	\$ 12,084,77	7),1	1,430 111011	ברוא לדל בנואם	04,777	
Percent of Direct Budget		9.4%		15.1%		14.6%	33.4%	100	20.0%		%	19.2%	21.7%	1%					

YTD REVENUES





YTD INVESTMENT YIELD TRENDS



\$4,500											MANAGEMENT OF THE RESIDENCE OF A STREET	1.0000%
\$4,000	0.8580%											0.9000%
\$3,500												0.8000%
\$3,000	0.6659%	%69									Transmiss daying menancine or project decision	0.7000%
\$2,500		0.5798%	88								The state of the s	0.6000%
\$2.000												0.5000%
												0.4000%
												0.3000%
											The state of the s	0.2000%
												0.1000%
												0.0000%
July	August	September	October	November	December	January	February	March	April	May	June	
					Interest		eld					eelings, was all record to

Carol:

Marsing and School Nursing program: Frances RN, one day per week and may advance to more days pending funding possibilities.

School is looking at "Integrated Behavioral Health and Primary Care. Dr. Womack (Lukes) Dr. Suda (FMRI resident).

Model of: Whole School, Whole Community, Whole Child (WSCC)

- Flu vaccine events: Friday and Saturday Marsing HUB last week, 38 and 28, babies to seniors, some no insurance. Partnership event with vision checks/glasses, cardiovascular screening, flu shots, good boxes. Love Heals partnership and sponsor ship. Well planned for decrease COVID risk
- Received additional sub grant funding for increasing influenza coverage to high risk population.
 Planning; Community sites, fire station drive through, walk in and Saturday clinics, Caldwell Housing (Farmway).

CS Staffing:

- Recruitment for two NP. Each to work 1 day per week to meet current client needs in clinics.
- Current NP, Molly. To assist with our new model of community reach, schools and mobile.
- Recruit for a PM2 to manage the medical clinic work and grow our business toward health care services at school sites (improved access) and mobile clinic work to reach those at higher risk.

Dr. Roscoe:

- SWDH is in discussions now with FMRI Nampa about staffing a once weekly reproductive health clinic at the Caldwell facility.
- The HD has transitioned to the Abbott BinaxNOW rapid antigen test for evaluation of symptomatic first responders, law enforcement, long term care facility staff, and students and teachers (previously we were using Abbott ID NOW rapid PCR test. This test requires minimal training, no special equipment and be performed in various settings. SWDH currently is conducting a validation exercise, comparing BinaxNOW to the gold standard of in-laboratory PCR testing. The end goal will be to have a rapid response team to assist with testing when needed off-site, and to offer testing in Caldwell, Payette, Weiser and Emmett health department offices.
- SWDH is collaborating with NNU to complete a demonstration project on wastewater analysis for monitoring of COVID-19 virus levels in a congregate setting (e.g. a college campus). The project may also evaluate this approach for public schools (possible partner: Marsing SD).



Phone: 208-459-4649 • FAX: 208-229-0404

This is a brief memo to outline items that we observed while onsite performing the audit. Items on this list will not necessarily show up on the audit report. This list is only for discussion in the exit interview.

Prior Year Finding 2017-101:

In the prior audit there was a difference found on the SEFA due to noncash items. Troy made us aware that new procedures were put in place to prevent this going forward. We reviewed the procedures and saw were multiple individuals were reviewing the information. We did not see the same issue this year.

Prior Year Finding 2017-201:

The indirect rate cost was calculated incorrectly in the prior year. We reviewed the indirect cost calculations for FY 2018 and 2019. It was noted that the error was corrected and that it was being reviewed by individuals that did not prepare the calculations.

Prior Year Finding 2017-202:

Monthly and Quarterly reports for MIECHV did not have supporting documents for all reports. We are still working with Troy and Adriana to make sure that this has been corrected.

Prior Year Finding 2017-204:

In prior year the District did not have documents available to support the allocation of direct costs. In reviewing direct cost allocations this year, we were able to obtain supporting documents showing how the allocation was being done. The allocation amounts tied back to the supporting documents.

Current Year Items:

WIC:

We reviewed a total of 60 WIC receptions files to make sure that all documentation was present and they were eligible to receive WIC. We only noted 1 error. There was 1 recipient that did not have appropriate proof of residency documented on their file. After reviewing the process with Emily Geary, we feel that this is not a systemic issue, but an isolated event. We reviewed the controls with Emily and feel that controls are in place to prevent this error from happening going forward.

Direct Cost:

We discussed the use of budgeted hours to establish the direct cost allocation with Troy. We feel that using actual hours will give a better allocation base then using budget. By using actual you will account for changes that take place during the year and better allocate those expenses. Troy has implemented this change going forward.