



## **BOARD OF HEALTH MEETING MINUTES**

**Tuesday, May 24, 2022**

### **BOARD MEMBERS:**

Georgia Hanigan, Commissioner, Payette County – present  
Lyndon Haines, Commissioner, Washington County – present  
Keri Smith, Commissioner, Canyon County – present  
Kelly Aberasturi, Commissioner, Owyhee County – present  
Viki Purdy, Commissioner, Adams County – present  
Sam Summers, MD, Physician Representative – present  
Bryan Elliott, Commissioner, Gem County – present

### **STAFF MEMBERS:**

In person: Nikki Zogg, Katrina Williams, Josh Campbell, Colt Dickman

Via Zoom: Troy Cunningham, Ashley Anderson, Doug Doney, Sam Kenney

**GUESTS:** No members of the public attended the meeting.

Via Zoom: Megan Smith, Boise State University

### **CALL THE MEETING TO ORDER**

Chairman Bryan Elliott called the meeting to order at 9:03 a.m.

### **PLEDGE OF ALLEGIANCE**

Meeting attendees participated in the pledge of allegiance.

### **ROLL CALL**

Commissioner Aberasturi – present; Dr. Summers – present; Chairman Elliott – present; Commissioner Hanigan – present; Commissioner Purdy – present; Commissioner Haines – present; Commissioner Smith - present.

### **REQUEST FOR ADDITIONAL AGENDA ITEMS; APPROVAL OF AGENDA**

Commissioner Elliott asked if there are additional agenda items. Board members have no additional agenda items or changes to the agenda as presented.

**MOTION:** No motion to approve the agenda was made.

### **IN-PERSON PUBLIC COMMENT**

No members of the public attended the meeting to provide in-person public comment.

### **OPEN DISCUSSION**

Commissioner Purdy initiated discussion of face covering requirements for employees of long-term care facilities. She shared a note from a hospice nurse expressing concern about detrimental effects of the pandemic on residents who have been isolated and the impact of mask wearing requirements for staff. Commissioner Purdy asked Board members to consider writing a letter to the Governor requesting

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reconsideration of the mask requirements for staff within long-term care facilities. Commissioner Haines shared that he has visited parishioners at long-term care facilities and not been required to wear a mask. Nikki explained that most long-term care facilities use the Center for Disease Control (CDC) requirements to drive their facilities' onsite requirements. The CDC has different masking requirements for residents, staff, and visitors. Nikki's understanding is that the facility can choose which requirements they follow; however, there may be consequences for not following the recommendations including fines and lack of reimbursement.

Board members directed Nikki to write a letter to Idaho Department of Health and Welfare (IDHW) and Governor Little requesting reconsideration of licensing requirements surrounding face coverings for staff.

#### **APPROVAL OF MEETING MINUTES – APRIL 26, 2022**

MOTION: Commissioner Haines made a motion to approve the April 26, 2022, Board of Health meeting minutes as presented. Commissioner Smith seconded the motion. All in favor; motion passes.

#### **APPROVAL OF SPECIAL MEETING MINUTES – MAY 11, 2022**

MOTION: Commissioner Haines made a motion to approve the May 11, 2022, Special Board of Health meeting minutes as presented. Commissioner Smith seconded the motion. All in favor; motion passes.

#### **INTRODUCTION OF NEW EMPLOYEES**

Division administrators introduced new employees.

#### **APRIL 2022 EXPENDITURE AND REVENUE REPORT**

Troy Cunningham, SWDH Financial Manager, presented the April 2022 Expenditure and Revenue Report. The target for this point in the fiscal year is approximately 83.3%. The revenues for state and county contributions appear low; however, this is due to the state's discontinuation of funding to the district and the counties' increase in contributions for the rest of the fiscal year. Contract revenue has also increased due to billings going out quicker.

Troy also explained that a portion of the funds set aside for Capital Outlay may need to shift into the next fiscal year due to workforce shortages and supply chain issues with contractors.

Troy reported that the investment yield continues to shift upward as well and provided an update on Committed and Reserved funds.

#### **CLINIC SERVICES UPDATE AND FEES APPROVAL**

Josh Campbell, Family and Clinic Services Division Administrator, provided an update. The focus of the division right now is to establish a solid foundation. The division is focusing on training for division leadership to equip them to train their own individual teams. Two other foundational pieces are basic I.T. training for staff and establishing consistency in roles and responsibilities. To accomplish this consistency, job descriptions have been updated. In addition, the division name has changed to Family and Clinic Services.

A school nurse to serve the Marsing School District has been hired and recruiting is in progress for a Nurse Practitioner. Board members discussed recruitment and retention challenges for the Nurse

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Practitioner position which has been vacant since November 2021. Dr. Summers suggested recruiting for part-time positions rather than one full-time position.

Josh also presented the Clinic Fee Schedule. He explained the sliding scale and the frequency of fee revision. Nikki clarified that the Board is responsible for setting and approving fees and addressing any fee appeals that are not resolved at a lower level. The plan is to review the clinic fees annually.

**MOTION:** Dr. Summers made a motion to accept the Family and Clinic Services fees as presented. Commissioner Haines seconded the motion. All in favor; motion passes.

### **YOUTH VOICE ON MENTAL HEALTH NEEDS, BARRIERS, AND A CRISIS CENTER**

Megan Smith, Boise State University Professor, attended the meeting virtually to present a draft report summarizing findings from focus groups conducted in the region SWDH serves. Megan specializes in youth mental health. As part of SWDH team's work around youth mental health, BSU talked to 36 young people between the ages of 11 and 18 and held focus groups throughout the SWDH region.

Bullying was the top stressor identified by the youth who participated in the focus groups. Heavy schoolwork, extra-curricular activity expectations and body image concerns are among the other top stressors youth noted.

Megan discussed youth self-perception of mental health. Almost all males said their mental health remained the same during the pandemic. Half of the females stated that their mental health status was worse during the pandemic.

When asked what defines additional support for mental health, many teens identify a counselor, and many teens indicate they do not want or need a counselor but others they know may benefit. Most young people indicate needing more appropriately supportive adults in their life and appreciate teachers and other adults checking in on them.

Teens also expressed a want for a calm, safe space at school where they can work on their schoolwork peacefully and without pressure. The youth also expressed interest in schools implementing mental health wellness days for use like physical illness days.

Youth expressed a preference for in-person communication regarding their mental health status versus texting or virtual meetings. Students also indicated they appreciated adults who listen without judgment. The youth also expressed a desire to be on the radar of an adult who can be aware of their challenges without being in their business.

Following these discussions, the focus groups discussed the youth crisis center. The youth responses were wide ranging with most expressing the desire for it to not be a hospital or detention center. When asked to describe their dream center, youth described a fun YMCA type environment with activities or a relaxing outdoor greenspace.

Megan also discussed stigma reduction and shared that youth advocates are an opportunity for schools when counselors are not on site at schools. The idea of a counselor meeting with every student is not feasible for the schools due to staffing and the number of students. Dr. Summers noted that within schools there seem to be several teachers who have a good idea of which youth are at risk.

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Commissioner Haines suggested that supporting youth needs to be a collaborative partnership between local schools, faith organizations, city organizations and other interested community partners.

Commissioner Elliott asked what the next steps are. Nikki will provide the next steps and information following Megan's presentation.

#### **YOUTH BEHAVIORAL HEALTH UPDATE**

Nikki Zogg updated Board members on efforts to improve youth behavioral health in the six-county region SWDH serves. The three focus areas of the efforts are: providing a safe space for children of adults who are in crisis, reducing juvenile justice and child welfare involvement and providing 24/7 services for youth in behavioral health crisis. Current resources for youth in behavioral health crisis are hospital or juvenile justice environments which are not therapeutic in their design.

Southwest District Health staff are working on two grant applications around the topic of youth behavioral health. One grant through the American Rescue Plan Act (ARPA) will seek funding for more sustainable options for respite care. The other grant around safe teen assessment centers is due Friday, May 27, and is a funding opportunity that came through Idaho Department of Juvenile Corrections. Staff have been working to convene groups of cross-sector partner agencies and individuals already engaged with these youth behavioral health efforts to help identify ways to improve and support sustainability. Nikki explained that SWDH is proposing a more de-centralized approach to reducing juvenile justice and child welfare involvement by expanding the resources that already exist among partner organizations. This model would serve 10- to 17-year-old youth who could access this model through a teacher, counselor, coach, faith leader, parent or through self-referral. Following an initial screening process, the youth may be referred to resources or to a treatment provider for assessment. Using youth advocates to assist with case management may be an option due to the shortage of licensed providers available in our area.

Commissioner Haines appreciates the de-centralized model due to how spread-out rural areas of our region are. He asked how a child in a rural area would get help through this model. Nikki explained that FindHelpIdaho.org is a library of resources that exist in the community. Screeners and assessors may be able to build an internal web-based screening and referral system. For example, if a teacher in New Meadows identified a student who may be at risk the teacher would go through the screening and if the child screened positive the teacher could connect the student to a provider identified through the web-based resource. The goal would be to identify local providers across the region to help meet that need.

Commissioner Haines referenced Megan's finding that youth do not prefer virtual or remote appointments and asked that the model focus on bringing providers to the students. Nikki agrees a centralized youth crisis model will not benefit our six-county region. She noted that the state prefers a centralized brick and mortar system. She also pointed out that if we are awarded funding, we will need to establish an advisory committee similar to the Western Idaho Community Crisis Center (WIDCCC) Advisory Committee that will need to include youth voice, which would be valuable in assisting us in addressing access challenges.

In the assessment piece done by a licensed provider there may be a need for an individualized plan which would require developing a way to determine what success looks like when the youth complete their individualized plan.

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Within the teen assessment center grant, the district would function as the backbone organization, similar to WIDCCC, by providing administrative support for the advisory committee, coordinating development of agreements with the screening providers, contracting with behavioral health providers for assessments, and contracting with community-based partners to provide case management

A youth crisis center in our region would be supported, but Nikki explained that identifying a location to serve as a youth crisis center has been challenging and the buildings identified as possibilities are not available long-term. The more conversations Nikki has around youth crisis center possibilities, the more apparent it is that the need exists for co-located support resources and services as well as youth crisis services.

Board members discussed how to create a space where kids feel safe but where they want to go and how that space can be filled with resources and adults who can help youth avoid a hospital or jail type environment. Board members support a de-centralized approach to align with what the youth want and support starting out as local as possible perhaps by placing additional resources in schools where youth spend 8 to 9 months a year.

Commissioner Smith encouraged Board members to not lose sight of the fact that the youth need support now. Commissioner Haines suggested running a pilot program to determine what works and checking into possibly renting a space if buying a location is challenging. Commissioner Purdy pointed out that the Boys and Girls Clubs and YMCAs are packed, and their models work. How hard would it be to open up another boys and girls club and partner with those folks? That model is already in place and has already proven to be successful. Commissioner Hanigan shared that Payette is already working on a Boys and Girls Club.

Commissioner Smith asked for clarification on the difference between Idaho Youth Ranch and the Youth Crisis Center. Nikki clarified that the Idaho Youth Ranch in Sand Hollow will be a place to provide residential care. The youth crisis center would provide short-term care.

#### **OPIOID SETTLEMENT UPDATE**

Nikki provided an update on opioid settlement. She anticipates the funding to last 18 to 20 years and the settlement has funding use parameters set out. The recommendation Nikki outlined includes reaching out to counties and cities that have opted to accept their funds to gauge interest in their participation in a group to discuss the resources, highest needs and barriers, and short-term and longer-term priorities. Treatment and intervention may be the best short-term priorities with a shift to prevention as a long-term focus.

Nikki proposed the period of July to October to bring together partners who work in this space to conduct gaps and needs assessments and establish a prioritization plan to bring to the Board. Commissioner Hanigan anticipates Payette County's settlement funds will go to the paramedics who are short staffed. Gem County also anticipates keeping their money local for the addiction center that is highly used and highly successful.

Nikki asked if the Board would like to have input on how the district chooses to use the funding it receives as well as the potential funding from Owyhee and Canyon County. Board members support having input knowing there is a center already working in Gem County and working to support that as a

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health district. Nikki asked if Board members have concerns about SWDH staff engaging with paramedics, law enforcement, etc. to gauge where the greatest needs are. Board members support that approach. Nikki will move forward with the plan as presented.

### **MOSQUITO SURVEILLANCE UPDATE**

Colt Dickman, Environmental and Community Health Services Division Administrator, provided an update on mosquito surveillance. He explained that in January 2020 his predecessor asked for guidance from Board members regarding vectorborne disease surveillance due to a reduction in funding from the state to support these activities.

Prior funds supported direct activities at the district. A former staff person had a passion for this and did many mosquito surveillance activities. Colt explained that there may be funding available to build capabilities inside of our SWDH team to train staff even though the capacity to provide mosquito-borne disease surveillance to set and monitor traps does not exist at this point. Colt asked if all of the counties are supported for vectorborne disease surveillance?

Chairman Elliott noted that Gem County has several districts that operate, are very active, and do a very good job. He asked if SWDH gets into abatement or surveillance? Nikki clarified that the district does not involve itself in abatement. Rather, the district's role is to trap, perform vector identification, , surveil for diseases of public health concern, and monitor disease trends.

Colt asked for an understanding from Adams, Owyhee, and Washington County if they are being supported and what can be done to plan proactively? Payette County, Gem County, and Canyon County all have mosquito abatement covered and are satisfied with the current agencies providing those services.

Commissioner Haines commented that Washington County would benefit from mosquito surveillance. At this point there is no wide support for abatement county-wide. Commissioner Aberasturi explained that Owyhee County gathers information from Canyon County and gets the information that West Nile has been detected.

Colt will look at capacity with state dollars to assist with Washington County and will continue to keep all the abatement districts and the counties without abatement districts in the loop for information.

Colt also explained to Board members that Land Development, Senior, Stephen Fitzner, accepted a position with Environmental Protection Agency (EPA) and this vacancy will create slower processing times in the subdivisions and development phase.

### **EXECUTIVE COUNCIL UPDATE**

Georgia Hanigan, Trustee/Executive Council Representative, reported on the most recent meeting where members discussed whether the health districts want a representative sent to the State and Local Boards of Health (SALBOH). The committee decided that money would be best spent elsewhere and will not send a Board member to SALBOH. Food inspection fees were also discussed. These fees are currently set in statute and the committee agreed that none of the seven health districts have the same amount of costs and Council members support urging the state to let the districts set their own fees.

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## **DIRECTOR'S REPORT**

### **Board Elections**

Board elections are coming up next month.

### **Budget Committee Meeting Date**

Nikki has become aware of a scheduling conflict with the Budget Committee Meeting due to a conflict with the Idaho Association of Counties annual meeting. Board members chose to keep the Budget Committee meeting date set for June 9, 2022, at 12:30 p.m. rather than 12 p.m. to allow Board members to conclude the IAC morning session at noon and transition to a location with Wi-Fi capabilities to attend the Budget Committee meeting virtually.

The Idaho Association of District Boards of Health (IADBH) meeting will be held virtually at 1:30 p.m. on Thursday, June 9, 2022, following the SWDH Budget Committee Meeting. Board members who do not plan to attend in person or virtually are asked to please complete the proxy form in their binder and return it to Katrina.

### **Budget Committee Invites and Proxy Forms**

These invitations and proxy forms have been sent out.

### **Summer IADBH Resolutions and Meeting Proxy Forms**

Proxy forms are available.

There being no further business the meeting adjourned at 12:01 p.m.

Respectfully submitted:



Nikole Zogg  
Secretary to the Board

Approved as written:



Bryan Elliott  
Chairman

Date: June 28, 2022