

Fort Wayne-Allen County Department of Health Minutes
Board of Directors Meeting
October 5, 2015

The regular meeting of the Board of Directors of the Fort Wayne-Allen County Department of Health was called to order in the Council Chambers located at 200 East Berry Street, Fort Wayne, Indiana, at 5:45 p.m., pursuant to the notice sent to all Directors in accordance with the bylaws.

The following Directors were present: Dr. William Pond, Patricia Hays, Ted Sobol, Dr. Todd Rumsey, Tim Pape and Mary Hess. Deb Lambert was absent.

Dr. William Pond, President, presided over the meeting. Jennifer Miller recorded the proceedings of the meeting.

Dr. Pond called the meeting to order at 5:45 p.m. The minutes from the previous meeting were approved. Motion was made and approved to accept the July 20, 2015 minutes.

Summary of Motions Passed at this Meeting:

- Motion was made by Ted Sobol to approve the July 20, 2015 minutes. Patti Hays seconded the motion. (MPU)
- Motion was made by Dr. Todd Rumsey to start the process to implement a needle exchange program. Patti Hays seconded the motion. (MPU)
- Motion was made by Tim Pape for a do pass recommendation on the changes proposed in the **Onsite Sewage System Ordinance**. Ted Sobol seconded the motion. (MPU)
- Motion was made by Tim Pape for a do pass recommendation on the changes proposed in the **Public & Semi-Public Swimming Pool Ordinance**. Ted Sobol seconded the motion. (MPU)
- Motion to adjourn the meeting was made by Tim Pape. Mary Hess seconded the motion. (MPU)

VISITOR PRESENTATIONS:

LookUpIndiana.org (Lutheran Foundation) – Marcia Haaff and Kristina Johnson

- Marcia Haaff, Executive Director Lutheran Foundation, and Kristina Johnson, Director of Community Initiatives, shared the foundation's mission about helping the community learn more about mental health issues, reduce the stigma associated with mental illness and help those in need gain access to the mental health providers.
- A tool the foundation is developing to help with all these goals is a new website: lookupindiana.org. The web site will offer a three pronged approach to helping individuals. 1) Education: resources, statistics and videos will inform readers about mental health issues. 2) Connectivity: provider lists and access to help lines will provide the most update to date information on how to connect with mental health services. 3) Promotion: The website's main goal is to help reduce the stigma associated with mental illness by offering links to blogs, videos and other information about mental illness. Marcia said the goal for having the website live is by the end of 2015.
- Dr. McMahan commented that this will help providers and the public learn more and get connected with important resources.

Sewer Board Update – Gary Chapple, Director of Pollution Control (the Board’s representative and ex-officio member on the Allen County Regional Water and Sewer District):

- Pending closing on financing, the sewer district awarded bids for construction on the six contracts mentioned at the last Board of Health meeting. The district will not issue a notice to proceed on these projects until funding is completed. Funding for these projects is scheduled to close October 22, 2015. Construction on this round of projects should begin as soon as funding is completed. The Department of Health is finalizing the exemption process for the eligible homes that applied for exemption in these project areas. The Sewer District is working on another round of funding for SRF septic replacement systems for seven homeowners that are interested and have completed all of the paperwork. The district is preparing to bid these systems out in the near future.

Health Commissioner’s Report – Deborah A. McMahan, MD

- The Community Health Improvement Plan for Children (CHIP) is going well. Committees are finalizing their strategic plans. There should be an update at the next board meeting.
- The local **Opiate Task Force** has met and is making progress in many different areas.
 - **Education:** Holli Seabury, Executive Director McMillen Health Center for Education, has looked extensively into education curriculum and has found that there is no national level curriculum to teach children about opiate abuse. Holli reported that Indiana has the resources available to develop a curriculum, but in order for a curriculum to be successful, the state legislature needs to make sure it is taught in schools. Dr. McMahan said that from a primary prevention standpoint, this is where we will see a biggest return on the efforts made to stop abuse.
 - **Narcan:** Fort Wayne Fire Fighters are now equipped to administer Narcan. Three lives were saved in the first 21 hours the trucks were carrying Narcan. Law Enforcement agencies will also soon be learning how to administer the drug. Plans are also in place to develop training for family members to administer Narcan.
 - **Neonatal abstinence:** Currently there are no available programs for addicted mothers. Bowen Center is looking into how they can help. Dr. McMahan said the resources are available, but the cases require integrated care.
 - **Needle Exchange Program** – Dr. McMahan said because of the HIV outbreak in Scott County, the governor and state legislature passed Senate Bill 461 allowing health departments in other counties who are experiencing an outbreak of Hepatitis C or HIV cases among IV drug users to open a needle exchange program (NEP). Although the law identifies the process needed to go through to open an NEP, it does not define the specific numbers that define an outbreak. Dr. McMahan said the department has been working on a strategic plan for opening an NEP if the board decides one is needed. She explained that outbreak means you have more cases than you normally expect. Dr. McMahan said that research has indicated that one should open an NEP before an outbreak occurs. She said that research also shows about one third of all Hepatitis C cases can be prevented by opening an NEP. She feels this is because the focus has been primarily on the needle and syringe. She said that Hepatitis C is a very stable virus and can survive on all the other paraphernalia used. You need to provide a complete kit of items to prevent spread of the virus.

Dr. McMahan also said that a NEP is a very cost effective program. Hepatitis C drugs run about \$80,000 per life time of a patient. HIV drugs run close to \$400,000. Needle kits run about \$5.00 per full kit. Dr. McMahan said research indicates that NEP's do not increase drug utilization and they also do not increase crime rates in an area. Organizations that support the evidence that NEP's should be used include: Center for Disease Control, American Medical Association, American Association of Pediatrics, the World Health Organization and the U.S. Surgeon General.

- **Hepatitis C cases in Allen County: Erika Pitcher, Community Health and Case Management Director:**

Dr. McMahan emphasized that the board has the opportunity to decide when will be an appropriate time for Allen County to open an NEP and what criteria should be used. She asked Erika Pitcher, Director of Community Health and Case Management, to share information about how the department is now collecting Hepatitis C data. Only acute cases of Hepatitis C are mandatory for reporting to the Indiana State Department of Health. Old methods of classifying Hepatitis C were done on an analysis of lab reports. No patient contact was initiated to assist in classifying the case as acute or chronic. Erika said that Hepatitis C is the largest communicable disease in Allen County and the state. Nationally, Hepatitis C cases have increased 151% from 2010 to 2013. In Indiana, the annual report of infectious disease says there were 27 acute cases in 2010 and in 2014 there were 140 acute cases. She said chronic cases were pretty consistent. Erika said Allen County normally sees between 200-250 cases a year. In the first three quarters of this year, Allen County has seen 270 cases.

Erika outlined the new process staff initiates when a positive lab is received. All patients are contacted in an effort to educate the patient. Three attempts are made to contact each patient, and if still unsuccessful in contacting the patient, a letter is sent to the patient containing educational materials. Erika said sending letters to a patient is not the most preferable method, because these patients are highly transient. Talking with patients is much more effective. Erika shared that the biggest issue the department has is getting patients into treatment. If patients don't have a primary care physician they can come to the Medical Annex for initial visit and then the patient will be referred to a physician who treats Hepatitis C. There is also a Manchester Pharmacy student who is helping the department develop a scholarship program through the pharmaceutical companies for the underserved patients who can't afford treatment.

Board Discussion:

Dr. McMahan asked the board, "What criteria do you want to look at in terms of an outbreak?" Mindy Waldron shared that the department would not need new staffing for an NEP. The cost is fairly nominal. In other counties, many supplies were donated and she would pursue that avenue as well if needed.

Dr. Pond said he sees lots of data where the NEP decreases overall health costs. Is there data that addresses life time incidents? Do the NEPs decrease the incidents of HIV and Hepatitis C for only the short term? Dr. McMahan said that she is not aware of any such life time data. She stated that the data shows, IV drug users will use the NEP only if it is readily accessible. She added they have to continue to use clean needles 100% of the time, or yes they could be infected. Patti Hays said that she thinks that the occurrence of more cases this year than in the past equals an outbreak. She thinks the counties that did experience large outbreaks wish they would have started an NEP sooner.

Dr. Pond asked board members what kind of data they would like to see. Dr. Rumsey responded, “We have already established that we need to track cases with the new method and old methods for about 18 months. If we track new and old way, we will be able to make a decision fairly quickly. You want to show that the new tracking method is valid. I think we meet the criteria now. It’s clear we are there. As we move forward, I need you to track it the old way too so we can compare the two. This is very discouraging. It deserves attention now.”

Dr. McMahan said, “I think we will need help in how we evaluate and monitor this. We will be offering screening and testing for many services. Measuring the effectiveness will be very complicated.” Dr. Rumsey suggested that for a year, Hepatitis C cases should be tracked with both the new and old methods. Then there will be data to compare. He added, “I think we meet the criteria now. This deserves attention now.” Patty Hays said, “To wait until we see another quarter of data is delaying the process.” Ted Sobol said he agreed. Mary Hess said, “There is not a lot of down sides to this.” Dr. McMahan, added “The downside is that most people think an NEP increases IV drug use. The data is really strong that it does not do this.” She asked Commissioner Peters if he wanted to offer any comments. Commissioner Peters said, “I haven’t had a lot of time to consider this. I am concerned that this will send a message that a lot of people will be really uncomfortable with. There has to be a real compelling reason to move down this track and the results will need to provide a very compelling response.”

“The cost is negligible, for me if we can prevent further spread and identify others who are at risk, early enough to make a difference in their disease course, and then we have helped the community in a great way. I’m less concerned with stirring the pot than I am with trying to have to back track if we have a huge explosion in a year or two and this was on our docket and we chose to ignore it,” said Dr. Rumsey. Tim Pape asked, “Logically, if a NEP is effective in that it helps reduce the spread of the disease and cost effective and doesn’t further harmful behavior, we have pretty clear data on that, why isn’t this standard operating procedure?” Mindy Waldron shared that the parameters of the new state law require a department meet certain recommendations. Once the board decides there is sufficient evidence that there is a Hepatitis C outbreak, then meetings will have to take place with elected officials and the public. The first step is having the board decide what constitutes an outbreak. That is why the department is working to define clear numbers in the Hepatitis C Cases. Tim Pape said what the department has is an educational issue; the data clearly states that an NEP will help reduce harm. Dr. McMahan requested that board members accompany her and Mindy Waldron when meeting with elected officials to help the officials understand the importance of the NEP.

Patti Hays said, “We have seen almost a 50 percent increase. I don’t know what is. If you need a motion, I’m ready.” Dr. Rumsey said, “Whereas I believe that there is an outbreak evident, I would move that we pursue actions to allow us to begin a needle exchange program.” Patti Hays seconded the motion.

Ted Sobol said he is in favor of the motion but the board needs to keep in mind that the word epidemic is going to scare the public. He added that the board needs to involve a lot of people and work on educating the public especially because of the short time period being requested to implement the program. Mindy Waldron said, “We are open to any suggestions the board has so we move ahead in a thoughtful manner.” Dr. McMahan agreed that community education will be the hardest component of this campaign. She said, “Along with launching public education campaign, we need to get everyone to understand how important an NEP is. We need all folks to understand it’s not just needles you can’t reuse. You can’t reuse anything because Hepatitis C is so easily transmitted. If we want to see real

impact, IV Drug users have to understand they have to use clean needles every time and not reuse anything.”

Dr. Pond added that the word epidemic conjures up a perception that this is a huge number of people. He said the department needs to make sure the public understands what the numbers mean. Mary Hess said, “This will be hard to get people to understand but by providing evidence of best practices, that will help.” Dr. McMahan said, “Primary prevention is still to get people into addiction services – but we also need to provide services like an NEP and prevent disease from spreading.”

Dr. Pond asked Dr Rumsey to repeat his motion. Dr. Rumsey said, “Whereas I recognize that an epidemic of Hepatitis C is presented in the data today, I would propose that we start the process to begin a needle exchange program in Allen County.” Patti Hays seconded the motion. (MPU)

Dr. Pond asked Dr. McMahan to explain what happens next. She said she and Mindy Waldron will start meeting with public officials and she would like a board member to be at those meetings. A public education campaign will also have to be developed. Dr. Rumsey said, “I think we can do this in a responsible, community centered way.”

- SEE ACTUAL COMMISSIONER’S REPORT FOR ALL OTHER ISSUES.

Communicable Disease Report – Deborah A. McMahan, MD

- Dr. McMahan said Allen County has seen an increase in phenomena cases in school age children. She thanked school nurses, Dr. Stienecker and the staff from Lutheran in helping her gather information about the cases. The Indiana State Department of Health will be able to use the data to investigate more. Dr. McMahan said, “We are blessed to have so many community partners helping on this.”
- Dr. McMahan indicated that the flu vaccine looks like a good match this year. She reminded all to get their shots this year.

- SEE ACTUAL COMMUNICABLE DISEASE REPORT FOR ALL OTHER ISSUES

Administrator’s Report – Mindy Waldron

- The department is rolling out a new professional media immunization campaign focusing on respiratory diseases: pneumonia, pertussis and influenza. The campaign is funded from the immunization grant received from the Indiana State Department of Health. This is a multi-faceted media campaign with a theme of: Heroes Need a Plan. Every year, the focus of the campaign will shift to feature different immunizations. Billboards, magnets, PSA’s, posters in pharmacies and provider offices, buttons/stickers for children and staff and a vehicle wrap for one the county vans are just some of the promotions planned.

- **Ordinances** – Mindy Waldron shared that approximately every three years updates are made to ordinances based on review of services provided and the cost to provide them. Mindy asked Gary Chapple, Director of Pollution Control, to explain the changes.
 - **Onsite Sewage System Ordinance** – clarifications were made to the wording to ensure all parts of a septic system are included in the requirement for permitting and inspections as the intent of the state rule. Some fees were also updated. Tim Pape made the motion to give a do pass recommendation to the ordinance changes. Ted Sobol seconded. (MPU)
 - **Public & Semi-Public Swimming Pool Ordinance:** Ordinance was updated to make it consistent with changes in the state rule. Some fees were also updated. Tim Pape made the motion to give a do pass recommendation to the ordinance changes. Ted Sobol seconded. (MPU)

SEE ACTUAL ADMINISTRATOR’S REPORT FOR ALL INFORMATION SHARED (but not discussed).

Personnel Report – Mindy Waldron

- Jennifer Stuff has been hired as the department’s second Nurse Practitioner.
- Sarah Boylan-Gore is new to the Support Staff.
- Steve Kiermaier was hired as an Environmental Technician for the Pollution Control Division.
- Keileigh Dantzer is the new Coding and Credentialing Specialist.
- The Food Division Director Position is open and the position has been posted.

Old Business

None

New Business

Motion to adjourn was made by Tim Pape and seconded by Mary Hess.

Adjournment: 7:35 p.m.

Next Board Meeting: January 25th, 2016, 5:45 p.m.

Respectfully Submitted,

Deborah A. McMahan, MD
Health Commissioner

William Pond, MD
Board President