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## Governance Committee

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February 19, 2019

**Chair:** Paul Patrick

**Present:** Dr. Joseph Miner, Marc Babitz, Lloyd Berentzen, Ralph Clegg, Randall Probst, Paul Patrick, Heather Borski, Kim Beck, Jerry Edwards, Tiffani Metoyer-Smith

**Visitors:** Nicole Bissonette, Eric Christensen, Lynne Nilson, Linnea Fletcher, Nichole Shepard, Anna Fondario

**Voting Members:** Dr. Joseph Miner, Lloyd Berentzen, Ralph Clegg, Heather Borski, Randall Probst, Paul Patrick

**Co-Chairs:** Paul Patrick, Lloyd Berentzen

### Minutes

Approve minutes from February 4, 2019 Governance meeting.

**Motion to approve:** 1<sup>st</sup>: Heather Borski 2<sup>nd</sup>: Dr. Joseph Miner

**Vote Yes:** Dr. Joseph Miner, Lloyd Berentzen, Ralph Clegg, Heather Borski, Randall Probst, Paul Patrick

### Pediatric Mental Health Care Access Program - Nicole Bissonette, Eric Christensen, and Lynne Nilson

- Grant opportunity from HRSA for \$445,000 per year for 4 years to link pediatric providers with specialty consultation such as pediatric psychiatrists or mental/behavioral health services.
- The goal is to assemble regional teams to create a database, link directly to consultation with the specialty pediatric care, and provide training to pediatricians about linking, care options, and screenings.
- The primary focus and funding is for health systems. Some funding will go towards coordination and training.
- Grant is due March 11<sup>th</sup>.
- Currently funding 4 Care Coordinators in San Juan, Central Health District, South East, and Tri County out of Title 5.
- Per the grant, "Pediatric" refers to patients up to age 26 but they are focusing on ages 2-19.
- Working with Gaining Access for Everyone (GAFE), a pediatric mental health project, to provide resources and training for providers seeking mental health information and options for pediatric patients that can be handled in their own offices rather than referring out.
- The goal is to help identify services that would help early suicide prevention.
- The grant was not offered to the Department of Human Services by HRSA. HRSA wanted it to be Title 5 grantee.
- 3 grants will be awarded.
- Hiring one employee.

**Motion to approve:** 1<sup>st</sup>: Heather Borski 2<sup>nd</sup>: Ralph Clegg

**Vote Yes:** Dr. Joseph Miner, Lloyd Berentzen, Ralph Clegg, Heather Borski, Randall Probst, Paul Patrick

**Diabetes and Heart Disease and Stroke Prevention Programs Improving the Health of Americans Through prevention of Management of Diabetes and Heart Disease and Stroke - Linnea Fletcher (Handout)**

- There are 3 grants with EPICC. Handout gives brief synopsis of each grant, the differences being the timing and the schedule with the continuation applications.
- The only grant being discussed today is the 1815 Diabetes Hypertension grant.
- The continuation application for Grant 1815 is due March 13<sup>th</sup> for the second year of funding.
- They split the 1817 core funding into 2 categories: A) Diabetes B) Hypertension
- The funding amounts for year 2 are the same for both categories, \$941,921 totaling about \$1.8 million.
- The funding period for grant 1815 is June 30, 2019 through June 29, 2020.
- Meeting requirements and schedules were discussed with the local health departments and ULACHES (Utah Local Association of Community Health Education Specialists) representatives Jesse Bush, Weber Morgan, and Jeff Smart, Salt Lake county.
- There are 3 required meetings for LHD.
  - EPIC forum once a year conference.
  - Healthy living work group (SPAN).
  - Clinic chronic disease management (CCDM).
- All other meetings are optional to local health departments depending on activities.
- Site visits are being planned with local health departments, ULACHES, and EPICC staff as well as looking at the liaison structure and support to the local health departments.
- Funding amounts for the 5 years have been evenly distributed for the local health departments so that the funding will be about the same amount each year. About \$300,000 per year as decided by previous Governance.
- EPICC forum meeting locations are chosen by the conference planner.
- Healthy Living Activity and Clinic Chronic Disease Management (CCDM) meetings can be attended via teleconference.
- Local health department budget is exactly the same and on a 12 month cycle
- The state budget increased because it was previously on a 9 month cycle and changed to a 12 month cycle.

**Motion to approve:** 1<sup>st</sup>: Lloyd Berentzen 2<sup>nd</sup>: Heather Borski

**Vote Yes:** Dr. Joseph Miner, Lloyd Berentzen, Ralph Clegg, Heather Borski, Randall Probst, Paul Patrick

**State Public Health Approaches to Addressing Arthritis - Nichole Shepard (Handout)**

- Year 2 of 5 for CDC grant for the arthritis program.
- Grant is being increased this year by about \$15k making the award for this year \$305,345.
- CDC has pushed that we have state access or state reach at a minimum of 1.4% (about 30,000 adults)

- Unique from the previous years is the strong focus on evaluation, health equity, physician referral, and counseling of patients to go into these evidence based programs as well as using physical activity as a tool to manage arthritis.
- “Better Choices Better Health” is an online version of “Living Well with Chronic Conditions” created to access more people who are unable to get to the classes.
- Funding is the same for local health departments, health systems, AAA’s, and CBO’s.
- The only cut this year was the budget to Canary, who houses “Better Choices Better Health”.
- There is an increase in FTE from 0.5 to 0.85 in preparation of ACL grant end in June.
- Will receive support and help from EPICC and VIPP and to help disseminate these programs.
- The money is being moved back to the state health department to preserve the 0.5 FTE.
- The 0.5 FTE will be utilized for all marketing, outreach, and communications including website maintenance and creates and provides training for partnerships.
- The 0.5 FTE has previously been covered by the ACL grant which will stop at the end of June.
- All online IT costs are managed by Canary who houses the program and provides reports, data, and analysis.
- When funding is limited, DOH staff can and should be and utilized for calls and coordinating.

**Motion to approve:** 1<sup>st</sup>: Lloyd Berentzen 2<sup>nd</sup>: Randall Probst

**Vote Yes:** Dr. Joseph Miner, Lloyd Berentzen, Ralph Clegg, Heather Borski, Randall Probst, Paul Patrick

#### **Public Safety and Public Health Information Sharing Partnerships - Anna Fondario (Handout)**

- Revisiting the grant brought to Governance in June 2018 to discuss how to allocate funds upon receiving.
- This grant builds on the work of the opioid crisis grant that DOH received last fall.
- Currently receiving about \$300,000 a year for 3 years. \$100,000 of that is allocated to the local health departments.
- Opioid internal dashboard for local health departments currently in development. Will be live in August.
- Potential local health department roll and funding:
  - Weekly monitoring of the opioid internal dashboard for anomalies and implementing response protocols when necessary in time of crisis for 2.5-3 years.
  - Weekly data entry for ODMAP, an app for local law enforcement and first responders to log when and where naloxone is administered.
  - Estimated to be about 1-5 hours per week.
- Funding is based on population and burden.
- Each LHD should have an Opioid Lead employee identified and will decide if this person or another employee will be responsible for weekly monitoring of dashboard.
- Grant started in October 2018 and will provide support and training on dashboard.
- Funding from Department of Justice grants are for the full 3 years and is not distributed yearly. Remaining funding will automatically carry over.
- Distribution of funding needs to be discussed to determine maximum effectiveness for LHD’s.
- Topic will be discussed at the March Health Officers meeting. Anna will provide example scenarios for funding distribution.

- The main concern at this time is the monitoring of the dashboard. ODMAP can be removed if needed as it requires a lot of local coordination and might not be ready yet.
- Local health departments will work with their local law enforcement agencies to promote and support the use of the app.

**Bring back to next Governance meeting.**

### **Other Agenda Items:**

#### **Governance E-Mail Notification Updates - Ralph Clegg**

- Jerry will review the email list to ensure the correct recipients are being notified.

#### **UCAN - Gary Edwards**

- Wasatch had applied and submitted an application for UCAN (Utah Cancer Action Network) grant within the timeline via email. When following up, they were told that the application hadn't been received by the deadline. Screenshots prove the application was sent on time.
- The last cycle 11 applications were received and 2 were disqualified due to late submissions. According to the program, they are planning to fund 5 of the 11 local health departments due to limited funds. Heather will look further into this and the Wasatch application.
- Heather will find out who is receiving funding and communicate this information with the nursing directors.
- These mini grants are small amounts of money to help organizations implement the UCAN action plans. Skin cancer prevention, tobacco cessation, and promoting physical activity and nutrition.

#### **State Nursing Director**

- The school nursing consultant has been considered as well as an epidemiology nurse who does healthcare associated infections.
- Dr. Miner will have a decision made this week.

**Next Meeting – March 4, 2019 – 11:30am – Room 401.**

#### **Motion to adjourn:**

**Motion 1<sup>st</sup>:** Randall Probst **2<sup>nd</sup>:** Heather Borski

**Vote Yes:** Dr. Joseph Miner, Lloyd Berentzen, Ralph Clegg, Heather Borski, Randall Probst, Paul Patrick