
Governance Committee

April 20, 2020

Chair: Paul Patrick

Present: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs, Jerry Edwards, Jill Parker, Dorothy Adams

Visitors: Laurie Baksh, Gary Mower, Anna Fondario, Kyla Davis

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Co-Chairs: Lloyd Berentzen & Paul Patrick

Minutes

Approve minutes from April 6, 2020 Governance meeting.

Motion to approve minutes: **1st:** Heather Borski **2nd:** Jeff Coombs

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Preventing Maternal Deaths: Supporting Maternal Mortality Review Committees - Laurie Baksh (handout)

- This is the year 2 application of a non-competing 5 year grant (CDC-RFA-DP19-1908).
- Award amount is \$374,743 per year from September 30,2020 - September 29, 2020.
- Utah was one of 25 states that received this funding to support staffing and intervention activities as well as case identification of maternal deaths.
- The funding will also be used to review the deaths with the Maternal Mortality Review Committee and implement actionable recommendations from the committee.
- Maternal death - Women who have either died during pregnancy or up to one-year post-partum.
- Medical records are requested from care providers regarding pregnancy, delivery, and post-partum care to create a case summary to submit to a committee of health professionals.
- The committee will review and determine if the death was related to the pregnancy, if it was preventable, and what could have been done to prevent the death.
- A Maternal Mortality and Morbidity symposium will be held in September 2020.
- Utah and Wyoming submitted a joint application.
- Utah is the awardee and Wyoming is a subawardee receiving \$62,000 of the grant.
- Utah's Perinatal Mortality Review Committee now acting as the review committee for both states.
- Per Governance's request, rural representation has been expanded to include representatives from Nephi, Vernal and St. George hospitals.
- Clinical expertise has also been expanded to include addiction specialists and mental health professionals.
- Further education will be implemented for those who report deaths to the medical examiners for quality improvement as well as education for community health care workers, providers, and home visitors to educate on postpartum warning signs.

Motion to approve - 1st: Heather Borski **2nd:** Ralph Clegg

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Emergency Department Surveillance of Nonfatal Suicide-Related Outcomes (ED-SNSRO) - Gary Mower (handout)

- This application is for the second year of a three-year \$146,985 grant.
- Project period September 1, 2019 to August 31, 2022
- This funding will be used to improve the timeliness of surveillance of nonfatal suicide related outcomes.
- Required activities are listed below:
 - Increase the timeliness of aggregate reporting of nonfatal suicide-related outcomes using syndrome definitions developed by CDC.
 - Disseminate surveillance finding to key stakeholders working to prevent or respond to suicide and nonfatal suicidal behaviors.
- 90% of the funding will go to salary for analyzing data. Some travel and supplies included.
- Success has been seen with the syndromic surveillance data and coding to determine the details to provide accurate numbers.

Motion to approve - 1st: Jeff Coombs **2nd:** Heather Borski

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS) - Gary Mower (handout)

- Application for second year of a three-year \$255,822 grant.
- This grant has been awarded for the past 14 years to collect data on homicides, suicides, deaths from legal intervention, deaths of undetermined intent, and unintentional firearm deaths to improve the planning, implementation, and evaluation of violence prevention programs.
- Data is used from police reports and the medical examiner's office to enter the data into the National Violent Death Reporting System.
- The data is used to analyze the contributing circumstances of these deaths.
- There is an additional \$50,000 estimated award to fund the collection of more firearm data including the firearm type, manufacturer data, model, and any additional data collected.
 - Six to eight states may receive this award ranging from \$25,000-\$105,000.
- The funding is primarily used for the salaries of two Abstractors, an Epidemiologist, and data collection employees.
- No violence prevention programs have been evaluated at this time due to the collection and evaluation of data. There is a future intention to do so.

Motion to approve - 1st: Heather Borski **2nd:** Ralph Clegg

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Harold Rogers Prescription Drug Monitoring Program (PDMP) FY 2020 Competitive Grant - Anna Fondario and Kyla Davis (handout)

- This application is for a new three-year grant funded at \$666,666 per year on behalf of the Division of Occupational Professional Licensing with the Department of Commerce as they do not have the capacity to apply for Federal grants.
- The funding will assist with navigating the Federal grant system as well as completing the quarterly progress reports.

- Multiple grants benefit from this partnership due to the enhancement of the PDMP and the ability to receive data regarding prescribing behavior for overdose prevention.
- Grant funds should be used to support a variety of PDMP implementation or enhancement activities that encourage the use of PDMPs to improve clinical decision making and prevent the abuse and diversion of controlled substances.
- Work is done closely with the Center for Health Data and Informatics to build the capacity to view and analyze data at DOPL. (Currently done at UDOH.)
- The activities listed on this application are as follows:
 - Automate current PDMP manual processes.
 - Analyze and disseminate PDMP data to support data driven decision making at the state and local levels.
 - Use RxCheck hub to expand integration of PDMP information into clinical workflow and support interstate data sharing.
 - Improve responsiveness and portability of the PDMP application.
- The majority of funding will be given to DOPL to help fund database programmers and informaticists.
- The remainder of funding will be used to assist with the quarterly reporting to the Bureau of Justice Assistance Grants as well as the Center for Health Data and Informatics at UDOH to provide technical assistance and expertise in helping build that capacity at DOPL.
- Controlled substances are currently included within the internal dashboard.

Motion to approve - 1st: Ralph Clegg **2nd:** Lloyd Berentzen

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Core State Violence and Injury Prevention Program (CORE SVIPP) - Anna Fondario (handout)

- This is a non-competitive continuing application for year five of a five-year grant cycle from the CDC for \$250,000 to support violence and injury infrastructure at state health departments.
- Required strategies include stakeholder education and coordination, supporting efforts in four pre-determined focus areas (motor vehicle, traumatic brain injuries, child maltreatment, intimate partner violence), and understanding of the shared risk and protective factor of the focus areas.
- Program surveillance and evaluation of core violence and injury indicators are reported on annually to the CDC on the supplied templates.
- The majority of funding is used for staff including an Epidemiologist, subject matter experts, and administrative support.
- This program has been recognized nationally by the CDC for the Shared Risk and Protective Factor Approach and has also partnered with CDC, ASTHO, and Safe States to develop resources for other states.

Motion to approve - 1st: Ralph Clegg **2nd:** Dr. Marc Babitz for Dr. Joseph Miner

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Overdose Data to Action - Anna Fondario (handout)

- This is a non-competitive continuation application for year two of a three-year grant for \$3,831,181.
- This funding is used to support recipients in getting high quality, comprehensive, and timelier data on opioid prescribing, morbidity, and mortality, and to use those data to inform prevention.
- All prevention efforts must be informed by surveillance.
- The requirements are broken up into two components with two separate budgets:
 - Surveillance - \$1,292,472:

- Collect and disseminate timely emergency department data
 - Collect and disseminate descriptions of drug overdose death circumstances.
 - Implement innovative surveillance.
- Prevention \$2,538,709:
 - Prescription drug monitoring programs
 - State-local integration
 - Linkage to care
 - Providers and health systems support
 - Public safety partnerships
 - Empowering individuals
 - Innovation projects
- At least 20% (%507,742) of the Prevention component must be used within local communities. \$620,000 has been allocated per this award per the formula funding.
- All contracts with the local health departments have been completed.
- An RFP has been done for local communities/organizations to be able to receive funding. The agencies awarded are:
 - South East Utah - \$55,000 focusing on home reduction services within the community.
 - Utah State Heart, an extension program at Utah State University - \$84,000 for efforts in Ogden and Carbon related to Stigma.
 - United Way - \$37,000 to support the 211 substance abuse disorder helpline.
- Health departments report through Catalyst. Due to COVID-19, no reports have been received and the reporting period has been extended.
- The funding is the same amount as the previous year and anticipated to be the same amount next year.
- Internal dashboard is developed and ready pending training. Training has been postponed to early June.
- Special Provisions activities include:
 - The goal is for local health departments use the data to inform their partners to inform and prioritize efforts needed in their community.
 - Another goal is to increase the number of pharmacies in the local participating districts as well as working with pharmacies to make sure a collaborative practice agreement is in place.
- Training may be provided online.

Motion to approve - 1st: Ralph Clegg **2nd:** Jeff Coombs

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs

Other Agenda Items:

- None.

Next Meeting - May 4, 2020 - 11:30am - Room 401

Motion to Adjourn

Motion: Lloyd Berentzen

Vote Yes: Dr. Marc Babitz for Dr. Joseph Miner, Heather Borski, Paul Patrick, Ralph Clegg, Lloyd Berentzen, Jeff Coombs