

**MONTGOMERY COUNTY COMMISSION ON HEALTH**

Meeting Minutes

May 16, 2013

401 Hungerford Drive, Rockville, Maryland 20850

Members Present: Mitchell Berger, Ron Bialek, Tara Clemons, Kathy Ghiladi, Graciela Jaschek, Alan Kaplan, Harry Kwon, Pierre-Marie Longkeng, Marcia Pruzan, Rose Marie Martinez, Daniel Russ, Wayne L. Swann, Shari Targum,

Members Absent: Michelle Hawkins, Linda McMillan, Marcos Pesquera, Gregory Serfer, Ashraf Sufi, Steve Thronson, Ulder J. Tillman

Staff Present: Doreen Kelly

Guests: Perry Chen, Asian American Health Program  
Dourakine Rosarion, Healthy Montgomery Program Manager

**1.0 Call to Order**

Vice Chair Ron Bialek called the meeting to order at approximately 6:10 p.m.

**2.0 Approval of Minutes**

There were no changes to the minutes of April 18, 2013. A motion was made and seconded to approve the April 2013 minutes. The motion was approved unanimously by voice consent.

**3.0 Report of Officers – Ron Bialek, Vice Chair**

- Vice Chair Ron Bialek updated the Commission on the COH's motion to send a letter of support for the Montgomery Cares Advisory Board's FY14 funding request. The letter was finalized and submitted to the County Council prior to their final budget deliberations. Copies were sent to County Executive Leggett and to Uma Ahluwalia, and the final letter was shared with the COH electronically.
- The Vice Chair updated the Commission on the COH's motion to send a letter of support for the Minority Health Initiatives' combined FY14 funding request. The letter was finalized and submitted to the County Council prior to their final budget deliberations. Copies were sent to County Executive Leggett and to Uma Ahluwalia, and the final letter was shared with the COH electronically.
- The Vice Chair announced that Kathy Ghiladi and Tara Clemons were appointed by the Chair to serve as the COH Nominating Committee for the future Chair and Vice Chair of the COH. They will be accepting nominations and conducting an election at the June meeting for the two officer positions. Please contact them if you are interested or would like to nominate someone.
- The Vice Chair reminded those members who are at the end of their first term that they must submit an email letter of interest to Mr. Leggett if they wish to continue for a second term on the Commission. New member interviews will be conducted in June, and the Membership Committee will include Dan Russ and Mitchell Berger.
- The Chair announced the next meetings of the Commission are scheduled for June 20, 2013 and July 18. There is no August meeting.

#### 4.0 PHS Chief's Report

- Public Health Administrator Doreen Kelly gave a brief report on behalf of Dr. Ulder Tillman noting that members had received Dr. Tillman's Chief's Report by email. It is also attached to these minutes.

#### 5.0 Presentation by Dourakine Rosarion, DHHS Special Assistant, Office of the Director

Vice Chair Bialek welcomed Dourakine Rosarion, who graciously agreed to return to the Commission this evening at its request to follow up on a presentation she had made earlier in the year on both the Affordable Care Act and the plan for the Connector/Navigator project. Ms. Rosarion reviewed the Connector Entity Grant, which was awarded to Montgomery County. It covers the Capitol Region of both Prince George's County and Montgomery County, a region with the 2<sup>nd</sup> highest number of uninsured residents in the state. The goal is to assist 52,000 uninsured, and give special attention to diversity and language challenges. She said that the County is preparing to hire and train a large number of individuals to help residents enroll in a health insurance plan beginning in October 2013. She welcomed commissioners' help in recruiting individuals for this effort. The State will handle the marketing plan and will give counties templates for customizing with some local information, while keeping a consistent message statewide. The State is creating and controlling almost all the health education materials. Ms Rosarion is preparing a local fact sheet.

Ms Rosarion answered commissioners' questions. She said in DHHS, the goal is to have a seamless system, eventually integrating eligibility for both medical assistance and income supports. This part of the planning will be presented soon. She noted that both counties also want to connect the family with other referrals and services they need. She agreed medical provider capacity issues may be a big challenge and welcomed the Commission's interest in this issue.

Mr. Bialek asked if it would be helpful if the COH requests the County to advocate to the State to be able to get the county level data, including demographic breakouts, it needs for health planning, from the CRISP Health Information Exchange. Ms. Rosarion thought that might be helpful but suggested waiting to see the report from the minority health groups on this similar issue of data needs related to health disparities. This is expected this summer.

#### 6.0 County Council Report and Staff Report

In the absence of Linda McMillan, Doreen Kelly distributed the Council's Final Reconciliation List for the FY14 Operating Budget, and pointed out the Public Health and Minority Health items on the list. She also gave a brief explanation of the Food Recovery Group funding from Council that will come to Public Health Services Licensing and Regulatory section to manage a project to redistribute food to the hungry (for ex., from caterers and restaurants to shelters or food pantries.)

#### 7.0 Action Items/Next Steps from Workgroups

Vice Chair Bialek reviewed the four workgroups' summaries to note the next steps for each.

- **Access to Care Workgroup** - Suggests a letter to the County Council and County Executive including several points such as advising about ongoing need to assure access for the uninsured even after the ACA is implemented; and to protect uninsured residents from the likely "crowd out" effect of so many newly insured residents needing primary care providers.
- **Data Workgroup** – The Data group still needs to refine the data the County needs and will be relying on the Minority Health groups meeting in late June to refine this.
- **Prevention Workgroup** – Suggests a letter to advise County officials on need to raise awareness/educate county residents on the many new prevention opportunities people will be able to use to improve their health under their insurance plans as required by the ACA.
- **Obesity/Cardio Vascular Disease Workgroup**- This group is still refining its next steps suggestions.

## **8.0 New Business**

- Dr. Kaplan mentioned the issue of vending machines selling sugary drinks in county buildings as a future discussion item.
- Dan Russ mentioned that we need to submit legislation ideas through DHHS forms and appropriate channels and the suggestion was made to invite Pat Brennan to a future meeting to discuss state legislation.

## **9.0 Adjournment**

There was a motion to adjourn at approximately 8:10 p.m. The motion was seconded and passed unanimously by voice consent.

Respectfully submitted,  
Doreen Kelly, Administrator Public Health Services

# Public Health Services Chief's Report April 2013

## SUCSESSES AND GOOD NEWS

### School Health Services

School Health Services (SHS) held its annual School Health Room Aide (SHRA) Training and Recognition event at the Silver Spring Civic Center on April 2, 2013. The event was well attended by 200 SHS staff and included special guest speakers: Uma Ahluwalia, Director of Montgomery County Department of Health and Human Services (MCDHHS), and Ulder J. Tillman, MD, MPH, Health Officer, MCDHHS. Several employees from the Montgomery County Employees Federal Credit Union (MCEFCU) attended and gave out information on available services offered to County employees. John Pierson, Chief Development Officer, MCEFCU, gave a presentation informing staff of an available savings option to cover benefits during the summer for 10-month employees. Additionally, an informative training on Managing Mental Health Challenges in the School Setting was conducted by Mary Willeried and Dew Vaughn from the MCDHHS Crisis Center.

### Montgomery Cares

Year to date utilization data for FY 2013 (July 2012 – March 2013):

○ Non-homeless patients	24,684	(79% of budget target)
○ Non-homeless encounters	61,793	(72% of budget target)
○ Homeless patients	244	(30% of budget target)
○ Homeless encounters	595	(66% of budget target)

## UPDATES ON KEY ISSUES

### Maternity Partnership

	<u>March 2013</u>	<u>FY13 YTD</u>
Number of patients referred to contracting hospitals	135	1288
New patients enrolled in prenatal care	141	1245
Number of teens enrolled	5	54
Percent entry during first trimester	54%	53%
Fetal losses	0	8

### Care for Kids

Number of children newly enrolled in Care for Kids (CFK):	91
Percent of children referred to CFK from DHHS SEUs:	86%
Number children served by CFK:	2,626
Number of CFK children screened for case management:	482

In order to meet rising costs for services, PCC will be implementing modestly higher co-payment rates for certain specialty care services beginning in FY14. Patients with no financial resources will continue to have their co-payments covered by the CFK contract.

### Emergency Preparedness and Response

Public Health Emergency Preparedness and Response program facilitated a *Cities Readiness Initiative Closed POD Partners Table Top Exercise* on April 30, 2013. The participants included members from the Nursing Homes and Large Group Assisted Living Facilities; Homeless Coalition; Fire & Rescue; Law Enforcement; Office of Emergency Management and Homeland Security; and DHHS/PHS. The purpose of the exercise was to discuss key planning issues related to Closed PODs that are likely to arise during a public health emergency.

### Refugee and Immunization Programs

Refugee Health Clinic at Dennis Avenue Health Center conducted 180 clinic appointments and initiated health screenings for 39 Asylees, 11 Refugees, and 2 Cuban Paroles during the month of April 2013.

Debra Aplan, Nurse Administrator, Immunization Program, submitted the final state report according to MCDHHS 2012-2013 Policy on Influenza Vaccination for Employees in the following service areas: ADS, BHCS, and PHS.

Total number of employees (ADS, BHCS, & PHS) covered by Influenza Vaccination Policy	1,040
Number of employees who received influenza vaccination at work	696
Number of employees who received influenza vaccination outside of work	205
Number of employees who did not receive influenza vaccination due to medical contraindications	41
Number of employees who did not receive influenza vaccination due to religious objections	9
Number of employees who did not receive influenza vaccination due to other objections	89

**86.6% of employees/contractors/consultants were vaccinated with influenza**, which exceeds the State goal of 85%.

### **TB Control Program**

TB Control welcomed new Nurse Manager, Kimberly Townsend. She will be supervising the nurses and covering clinical services within the clinic.

### **Environmental Health**

The EHS Staff in Licensure and Regulatory Services conducted 702 routine food service inspections, 47 re-inspections, 22 mobile unit inspections and 88 itinerant food service inspections. Itinerant food service inspections increased 86% over March. This is typical for spring and summer months. Critical violations were found during 139 food service inspections. Five (5) food service facilities were closed and re-opened when the critical violations were corrected. Forty-nine (49) food service complaints were investigated. There was one (1) food borne outbreak investigations in April. The EHS Staff conducted 254 Trans fat inspections with 16 violations noted. Fifty-three (53) nutritional labeling inspections were conducted and seven (7) violations noted. Four (4) smoking violations were noted during routine food service inspections. The EHS Staff inspected 29 group homes, 2 nursing homes, 3 domiciliary care facilities, 1 private school, and 180 swimming pools. Sixteen (16) rat complaints were investigated with 10 violations. Twenty-nine (29) plans for new food service facilities were reviewed and approved.

### **Dental Program**

As part of their continuous quality improvement efforts, CHS Dental Programs is conducting a peer review process in their six dental clinics. This effort was designed to provide an effective, objective, and uniform method of evaluating clinical dental services to assure that high quality care is provided to all patients in a professional manner. The purpose of the quality assurance review process is to assess and improve the quality of dental care delivered to health department patients. Results will be available at the end of the fiscal year.

### **Improved Pregnancy Outcomes Program**

The Fetal and Infant Mortality Review Board (FIMR) and its Community Action Team (CAT) submitted a Letter of Support for Holy Cross Hospital's grant application for State Minority Infant Mortality Reduction Program funding. Plans are being finalized for the annual FIMR/CAT Pregnancy Data Meeting and Member Appreciation Event to be held on June 6, 2013, at Bohrer Park Center, Gaithersburg.

### **Commission on Health**

On April 3, 2013, Commission on Health (COH) Vice Chair Ron Bialek presented testimony at the DHHS Boards, Committees and Commissions annual meeting with the County Executive. Mr. Bialek gave an overview of the COH obesity prevention recommendations from last year along with this year's focus on the Affordable Care Act and continued work related to Healthy Montgomery on obesity and cardiovascular disease.

### **HOT SPOTS**

#### **Nursing homes**

A nursing home received a harm deficiency when the facility staff failed to apply bilateral arm splints correctly to a resident and failed to monitor the condition of the skin under the splints. This facility will receive a civil money penalty.

### **Group Homes**

Serious bed bug infestations seem to be increasing in numbers as well as intensity. In response to a group home complaint, the environmental inspector found a major infestation with bed bugs not only on the beds and furniture, but the walls. Residents had bed bug bites. The provider had to move the residents to have the house treated. A follow-up visit several months later disclosed a smaller infestation. The provider was directed to have an exterminator treat the house again. Additionally, several other group homes have repeated bed bug infestations.