

# ALLEN COUNTY DEPARTMENT OF HEALTH

April 17, 2023 Executive Health Board Meeting

5:45p.m. – Citizens Square, 200 E. Berry St., Fort Wayne, IN – ROOM B-035

# *AGENDA*

Call the meeting to order – William Pond, MD, Board President

Meeting Reminder Statements – Mindy Waldron

Approval of the Minutes for the January 23, 2023 Board Meeting\*\* – William Pond, MD

EXTERNAL PRESENTATION (will be done virtually): Infant Mortality Rates/Maternal Child Health – Eden Bezy, Director of Maternal & Child Health, Indiana Department of Health

#### **BOARD APPOINTMENT REPORTS:**

- Health Commissioner's Report (Dr. Thomas Gutwein)
- Medical Director's Report (Dr. Anna Menze)
- Department Administrator's Report (Mindy Waldron)

# CONSENT AGENDA: (one vote to accept all items below as submitted)\*\* -- (Mindy Waldron)

• Personnel Report – (Mindy Waldron)

**Old Business** 

**New Business** 

Adjournment\*\*

\*\* Vote is/may be required

## HERE ARE THE REMAINING 2023 BOARD MEETING DATES FOR YOUR CALENDARS:

• 7/17/2023, 10/16/2023

•••••

MEDIA & PUBLIC NOTE: No questions will be entertained and no interviews will be conducted on the items listed on the agenda above prior to the Board Meeting. For this meeting, all media inquiries will be conducted at the conclusion of the meeting. Since this is a public meeting and not a public hearing, no public comments will be taken for items/issues not already on the agenda. Thank you for your understanding and cooperation.

**NOTICE:** Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies or procedures to participate in a program, service, or activity of Allen County, should contact Allen County Title VI Coordinator Laura Maser, (260) 449-7555, <a href="mailto:laura.maser@allencounty.us">laura.maser@allencounty.us</a>, as soon as possible but no later than forty-eight (48) hours before the scheduled event. Individuals requiring special language services should, if possible, contact the Allen County Government Title VI Coordinator at least seventy-two (72) hours prior to the date on which the services will be needed. The meeting is open to the public.

# Allen County Department of Health Minutes Board of Directors Meeting

April 17, 2023

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

Directors Present: Dr. William Pond, Patti Hays, Dr. James Cameron, Mary Hess, and Theodore Sobol. Directors Absent: Deb Lambert and Marlon Wardlow.

Dr. Pond presided over the meeting. Kimberly Meyer recorded the proceedings of the meeting.

Dr. Pond called the meeting to order at 5:45 p.m.

## Meeting Reminder Statements from Mindy Waldron:

- Remember to speak into your microphone and avoid tapping.
- Have new microphones and they pick up sound very well.

# Summary of Motions Passed at this Meeting:

- A motion was made by Patti Hays to approve the January 23, 2023, minutes. Dr. Cameron seconded the motion. Motion carried unopposed.
- A motion was made to approve the consent agenda by Dr. Cameron. Mary Hess seconded the motion. Motion carried unopposed.

#### **External Presentation:**

# <u>2021 Infant Mortality: Allen County - Eden Bezy, Director of Maternal & Child Health, Indiana</u> <u>Department of Health</u>

- Maternal Child Health Priorities: 2020 2025
  - Reduce Preventable Deaths
  - Prevent Substance Use
  - Promote Physical Activity
  - o Access to High-quality, Family-centered, Trusted Care
  - Strengthen Mental, Social, and Emotional Wellbeing
  - o Engage Families and Youth
  - Reduce Health Disparities and Inequities
  - o Ensure Frequent Surveillance, Assessment, and Evaluation
- Infant Mortality Rates (IMRs) 2012 2021
  - Indiana's infant mortality rates as well as Allen County's have been well above the U.S. rates every year from 2012 to 2021.
- Indiana IMRs by Race and Ethnicity 2012 2021
  - Non-Hispanic Black IMRs have been the highest on average every year from 2012 to 2021, followed by Hispanics being the second highest.
- County-Level Rates by Race/Ethnicity 2017 2021
  - Stable Non-Hispanic Black IMRs in Allen County are 15.5, compared to 22.7 in Elkhart County and 11.1 in Marion County.

- Stable Hispanic IMRs in Allen County are 8.1, compared to 8.3 in Elkhart County and 6.1 in Marion County.
- Infant Mortality Rates 2017 2021
  - Non-Hispanic Black IMRs are higher than the rates overall for Indiana, the Northeastern region, Allen County, and Zip codes 46806 and 46808.
  - Non-Hispanic White IMRs are lower than the rates overall in Indiana, the Northeastern region, Allen County, and Zip code 46808 but are higher in Zip code 46806.
  - Hispanic IMRs are higher than the rates overall for the Northeastern region and Allen County, the same for Indiana overall, and lower in Zip codes 46806 and 46808.
- Allen County IMRs by Year 2017 2021
  - o The IMR for Allen County from 2017 to 2021 is 7.0 (26,210 births, 184 deaths).
- Causes of Infant Mortality
  - The highest cause of infant mortality in Allen County is perinatal risks, followed by congenital anomalies, SUIDs, other, and assaults/injuries.
- Birth Outcomes
  - For Allen County from highest percentage to lowest: Mothers of Medicaid (36.6%), No Early Prenatal Care (33.6%), Not Breastfeeding (16.6%), Preterm (10.8%), Low Birthweight (9.3%), Tobacco Use During Pregnancy (7.7%), Smoking During Pregnancy (7.4%), Teen Pregnancy (4.5%), and Very Low Birthweight (1.3%).
- Allen County Birth Outcomes by Race/Ethnicity 2021
  - Non-Hispanic Black percentages in each area above are higher than the percentages for Allen County overall.
  - Non-Hispanic White percentages are higher than Allen County only in two areas:
     Smoking During Pregnancy and Tobacco Use During Pregnancy.
  - Hispanic percentages in each area above are higher than the percentages for Allen County overall, except Very Low Birthweight, Not Breastfeeding, Smoking During Pregnancy, and Tobacco Use During Pregnancy.
- Who is the Indiana Department of Health Partnering with to Improve IMRs.
  - The Indiana Department of Health is partnering with local hospitals and organizations to improve IMRs.
- What the Indiana Department of Health does not know about IMRs in Allen County and what they would like to know.
  - Make up of communities.
  - Race/ethnicity data beyond Non-Hispanic White, Non-Hispanic Black, and Hispanic.
  - What are the identified needs of individuals in the zip codes of note (46806 and 46808).
  - O Who else is doing the work?

#### Discussion

- Dr. Cameron asked, "Why is infant mortality considered a public health issue?"
  - Eden responded, "Infant mortality is one of those bell weathers of health within a population and just apart from the tragic results of an infant not making it to their first birthday. For me it really is a descriptor of society and how we take care of our most vulnerable folks of moms, babies, and kiddos and it is the culmination of things that we have so many opportunities to provide intervention for: access to care, breastfeeding support, healthy families of folks that lived through trauma, and prevention of injury. It really is a culmination of all the things that public health is about."

- Or. Cameron inquired, "One of the slides that was shown was the characteristics of our population as a whole for the women that deliver, do you have that data broken down by the families that lost a child and what their characteristics are compared to the rest of the state?"
  - Eden replied, "The next iteration of this data is to start linking our death records and our birth records. Like I mentioned at the beginning of the presentation, we have this kind of static data set of all the births in the state and then we have this static data set of the deaths we have in the state and so our epidemiologists are working on linking those births and those deaths so we can see those characteristics of those deaths, what was on their death record and what was their mom's journey like during pregnancy. We have some examples of that data on our website and I'm happy to forward that your way or Mindy's way and she can share. Some of the things that have really stood out are: 2 out of 5 infant deaths did not have early prenatal care and 3 out of 5 smoked during pregnancy or were exposed to tobacco use. We look for these common themes when we link these two important data sets."
- o Dr. Cameron asked, "How do we measure infant death, or I guess a live birth compared to the rest of the country compared to the rest of the modern world because our infant mortality rates vary quite a bit in Indiana vs. US vs. European countries?"
  - Eden responded, "I can't speak to European countries but what I can share is and maybe this is helpful to how we define an infant death, an infant must be born and take a breath for it to be considered an infant and then die within 364 days of delivery. Anything before that is considered a fetal death. This definition is somewhat standard across the states."
- Mary Hess inquired, "On the birth outcome slide you have percentages listed for both Indiana and Allen County, do you have hard numbers you can share?"
  - o Eden said she will pull the numbers and send them.
- Patti Hays asked, "Identifying those at greatest risk beyond these economic and race attributes, is there any way to capture information regarding perhaps prior family planning, experience, contact with OBGYN or general healthcare?"
  - Eden replied, "That is an interesting question and I think when we link data, we can get a clearer picture of some of these variables."
- Dr. Pond asked, "I see that you looked at smoking and Medicaid, how about drug use during pregnancy?"
  - Eden replied, "That is not something that is currently asked on the birth sheet, so the best we can do is tobacco use."
- Patti Hays inquired, "I noticed this goes through 2021 and it takes a while, any forecasting or saying what 2022 was like, better or worse?"
  - Eden replied, "We will have our finalized data set mid-summer and can start cleaning that data up, right now we have no sense either way."
- Or. Pond asked, "I noticed on the statistics, that if you look at the mothers on Medicaid the Non-Hispanic Blacks and Hispanics are just about the same for Medicaid and for no prenatal care but the Non-Hispanic Blacks death rate is almost twice the Hispanics, except for this last year's spike. We see that the Non-Hispanic Blacks are not breastfeeding at about twice the rate of Hispanics, and they have about three times the rate of smoking during pregnancy. Are there any things that we can take out of that we can target to try to bring that statistic down?"

- Eden responded, "I just think there is a significant opportunity for intervention there, especially as we see Medicaid unwinding and the public health emergency unwinding, it will be important that families know their options of staying on Medicaid and leveraging our MCEs and the folks that serve these women getting them connected to care as soon as possible."
- Patti Hays asked, "Almost a question for you Mindy, it dropped from 17 to 19 and then went up, did we do something and then stop doing something?"
  - Mindy responded "What I can tell you and what I was going to end with, is this is one of the topics that local public health departments are really not involved with currently, and they would be if the funding passes. We will have new core services required of us. One of those areas would be a lot about maternal child health and infant mortality. So, I don't know that we can answer that as to what we did because probably we didn't do anything."
  - Dr. Gutwein responded, "We need to be more aware of what everyone is doing, what organizations are doing what and what gaps there are."
- Mary Hess stated, "As funding comes in, I know the Prenatal & Infant Care Network probably could help you if you are starting to identify gaps."

#### **Board Appointment Reports:**

#### Health Commissioner's Report - Thomas Gutwein, MD

- Influenza deaths in Allen County for 2022-2023
  - o Allen County 15 deaths
  - o Indiana 259 deaths
  - o 65+ 194 deaths
- COVID-19
  - o Numbers are currently holding steady at very low rates with very few deaths.
  - Monitoring of COVID-19 virus at the Fort Wayne Water plant is staying steady at the lowest rates since monitoring began.
- Racism and Health Equity
  - Dr. Virginia Caine, Director and Chief Medical Officer, Marion County Health
     Department was the featured speaker at the Lunch and Learn put on by Health Visions
     Midwest.
  - Contributors to Health and Health Care Inequities.
    - Health System Factors
      - Health services organizations, financing, and delivery
      - Health care organizational culture, QI
    - Patient-level Factors
      - Beliefs and preferences
      - Race/ethnicity, culture, family
      - Education and resources
      - Biology
    - Clinical Encounter
      - Provider communication
      - Cultural competence
    - Provider Factors
      - Knowledge and attitudes

- Competing demands
- Implicit/explicit biases
- Structural Factors
  - Poverty/wealth
  - Unemployment
  - Stability of housing
  - Food security
  - Racism
- o The U.S. has now lost life expectancy twice in the past decade.
- Deaths from COVID-19 since 2020, along with a rise in "deaths of despair" (suicide, drug & alcohol-related deaths) brought underlying social fractures into sharp focus.
- Differences in the conditions of everyday life increased Black and Hispanic persons' exposure to COVID-19 and resulted in a loss of life expectancy in 2020 that was 2.5 times the loss among white persons.
- o Public Health and Health Outcomes
  - What Makes Us Healthy
    - Access to Care 10%
    - Genetics 20%
    - Environment 20%
    - Healthy Behaviors 50\$
  - What We Spend on Being Healthy
    - Private Insurance, Medicaid, Children's Programs 88%
    - Healthy Behavior 4%
    - Other 8 %
  - The things that most impact health outcomes are not well funded, which contributes to greater healthcare needs over the long-term.
  - Investments in public health have as high as a 14:1 return on investment.
- The 5 Leading Causes of Death by Reported Race and Sex: All Age Groups, City of Fort Wayne Residents, 2018.
  - Total Population
    - Diseases of Heart
    - Malignant Neoplasms (Cancer)
    - Chronic Lower Respiratory Diseases
    - Accidents (Unintentional Injuries)
    - Alzheimer's Disease
  - White Population
    - Diseases of Heart
    - Malignant Neoplasms (Cancer)
    - Chronic Lower Respiratory Diseases
    - Accidents (Unintentional Injuries)
    - Alzheimer's Disease
  - Black Population
    - Diseases of Heart
    - Malignant Neoplasms (Cancer)
    - Accidents (Unintentional Injuries)
    - Assault (Homicide)

- Cerebrovascular Diseases (Stroke)
- Health Outcomes, Indiana 2022
  - Health outcomes represent how healthy a county is right now, in terms of length of life but quality of life as well.
  - Allen County is ranked among the higher middle range of counties in Indiana (Higher 50-75%).
  - Ranked 46 out of 92 counties in Indiana.
- Health Factors, Indiana 2022
  - Health factors represent those things we can modify to improve the length and quality of life for residents.
  - o Allen county is ranked in the lower middle range of counties in Indiana (Lower 25-50%).

#### **Discussion**

- Dr. Cameron asked, "With regards to deaths from influenza this last year, with the population that was over 65 do you have a breakdown of how many of those deaths may not have had a vaccine?"
  - Dr. Gutwein responded, "No and that was not available. I did look for that specifically."
  - o Erika stated that she could get this data if need be.
- Or. Pond asked, "The COVID-19 vaccine, we got the XBB 1.5 that seems to be coming online, does it look like the vaccine we are giving out will help protect against this variant?"
  - Dr. Gutwein responded, "I have not heard that it is not, and it seems like it would be okay."
- Dr. Pond followed up with, "And is the new variant is it getting less lethal than it was to begin with?"
  - o Dr. Gutwein replied, "I do not know for sure, good question."

See meeting supplements for full statistics.

#### Medical Director's Report - Anna Menze, MD

#### Refugee Health:

- Received 214 refugees so far this year.
  - Each refugee is typically seen for 3 separate appointments all required to be completed within 90 days of arrival.

#### Medical:

- COVID-19 vaccines have slowed down.
  - o 98 given this year.
- Conducted a reminder recall event with 217 patients under the age of 18 that were due for vaccines.
- Continue to provide bi-weekly onsite vaccinations at the Fort Wayne Rescue Mission and Charis House.
  - o 57 people vaccinated so far this year.
- Continue to offer STD testing and treatment at the jail on Wednesday mornings.
  - o 10-15 patients seen each week.

- The immunizations team has been very busy conducting the first step of the refugee medical process, the refugee screening.
  - o Have assisted with screening over 200 incoming refugees since the start of 2023.
- Continue to offer a full STD exam and follow up for SART referrals.

# Infectious Disease and Case Management Division:

- Continue to struggle with LTBI medication shortage.
  - o Continued shortage of rifapentine, previously rifampin, now isoniazid.
  - The only treatment option currently is daily rifampin for 4 months.
- Continue to screen community referrals for LTBI.
  - o Offer treatment to those that are interested in the longer treatment.
  - o The clinic is currently treating 10 LTBI patients.
- Received less than 5 new cases of TB so far this year.
  - Continue to treat several cases from last year.
    - The staff does a wonderful job at successfully navigating both difficult medical and social cases.
- Top 5 infectious diseases for 2023 thus far:
  - O Hepatitis C (Chronic & Acute) 86
  - o Latent TB 26
  - Streptococcal Disease, Invasive, Group A 17
  - Hepatitis B (Chronic) 15
  - Campylobacteriosis 11

# Allen County HIV/STD Surveillance Data for 1st Quarter (January 1 - March 31) 2023\*:

INFECTION	2023 QUARTER ONE TOTAL	2022 QUARTER ONE TOTAL
Chlamydia	615	517
Gonorrhea	184	182
Early Syphilis	9	10
Late Latent Syphilis	14	8
HIV	5	6

<sup>\*</sup>Preliminary numbers for Allen County

- 2023 quarter one compared to 2022 quarter one:
  - o Chlamydia Increased 19%
  - o Gonorrhea Remain Stable
  - o Early Syphilis Very Similar
  - Late Latent Syphilis Increased 75%
  - o HIV Very Similar

#### **STD Division:**

- Outreach event for Cinderella Dress on March 28<sup>th</sup>.
  - 1,089 teens, compared to 420 last year.
  - Gold pouches with condoms were distributed and girls were provided with health information on STIs and clinic resources.

#### **Syringe Services Program:**

- Open weekly on Tuesdays from 1-3:30.
- Have had over 350 visits so far this year.
- An average of 20-30 participants each week.
- Offer on-site mental health, Hepatitis C care coordination, basic wound care education, routine vaccinations, and Hepatitis C and HIV testing.
- Distribute Narcan and train individuals on how to use it.
  - o Distributed over 275 doses so far this year.
  - Received a grant to continue to provide Narcan through the rest of this year.

#### **Discussion**

- Dr. Pond asked, "When we started this syringe needle exchange program one of the metrics that was put up was that we would try to hit over 85% of the needles returned. What are we running on that?"
  - Dr. Menze responded, "I do not have this quarter but last quarter we were over 99% and last year we were over 100%."
- o Dr. Pond inquired, "The cases of TB, have we seen any in any healthcare workers?"
  - Dr. Menze responded, "We are not at a value we can say that because it is not over that 5 but that is something that's changed as some only do the questionnaires and others do testing."

#### Administrator's Report - Mindy Waldron

- Governor's Public Health Commission (GPHC) HB 1001 & SB 4
  - HB 1001 will define the money side of things and mechanisms.
    - The financial amounts were reduced a bit, but the bills were being heard in both chambers today - could still change.
      - The original request was \$250M to \$200M, then it moved to \$75M first year and potentially \$150M a year thereafter, it is still a moving target.
  - SB 4 will define the core public health services, requirements for opting in to & receiving the monies, budget requirements, and reporting/hiring/etc.
  - There were some amendments on Friday that are concerning.
    - Preference given to rural counties first for the funding, counties are given until
       October to opt in.
    - Based on the remaining amount after rural counties opt in, larger counties would possibly be able to receive additional funding January 2024.
  - Proposing changes to Boards of Health.
    - From 7 to 9 members:
      - 6 Commissioner appointed members (eligibility based on profession/expertise).
      - 2 members appointed from each of the 2 most populous cities (Commissioners ultimately appoint).
      - 1 member appointed by County Council.
    - Capped the political party affiliation numbers.
  - The bill would still require local health departments (LHDs) to complete or ensure completion of all the core public health services they have defined, more were added.
    - Proposed a cap on the percentage of the new funds that could be used on current services vs. new core public health services.

- Would require LHDs to develop a grant program for certain services.
- Hiring practices may change under this bill.
- Future year funding is still uncertain.
- The current version still calls for the Executive Body to vote to opt in (Commissioners) but uncertain when.
  - Removing the 4-5 year opt in timeframe, perhaps each year.
  - Requires County Council to approve the budget.
    - Two budgets would need to be created, one for county funds and one for GPHC funds.
  - Requires convening of local partner entities, and for the development of a local plan (gaps), and other things.
- Public Health Workforce Stats
  - Population Served 300,00 or more.
    - Number of LHDs 4 (Marion, Lake, Allen, Hamilton)
    - Average Number of Full-Time Employees 204 (25-692)
      - Allen County Department of Health has 63.
    - Average Number of Part-Time Employees 20 (3-53)
      - Allen County Department of Health has 3.
    - Average Total Employees 224 (32-745)
      - Allen County Department of Health has 66.
- GPHC Core Public Health Services
  - o Current
    - Food Protection
    - Communicable Disease Prevention & Control
    - Lead Poisoning Case Management & Screening
    - Pest Control & Vector Control (Abatement)
    - Public Swimming Pool Inspection/Testing
    - Residential Onsite Sewage System Inspection
    - Orders for Decontamination of Methamphetamine Labs
    - General Sanitation Complaints & Remediation
    - Tattoo, Body Piercing & Eyelash Extensions Sanitation
    - Vital Records
    - Childhood Immunizations
    - TB Control & Case Management
    - Emergency Preparedness
    - Child Fatality Reviews
    - Suicide & Overdose Fatality Reviews
    - Testing/Counseling for HIV, Hepatitis C & Other STI's
  - o New
    - Tobacco & Vaping Prevention/Cessation
    - Supporting Schools (Nutrition, Physical Activity, Hearing/Vision/Oral Health Screening)
    - Maternal & Child Health
    - Trauma & Injury Prevention Education
    - Referrals to Clinical Care
    - Prevention/Reduction of Chronic Illness/Disease
- What is Happening Now

- Bills will be finalized before 4/29
  - IDOH & the Core Leadership Committee are still working through the KPIs/measures for each core public health service for LHDs.
- If the bills pass (and are doable), next steps are:
  - Work with Commissioners to discuss opting in.
  - Begin developing the two budgets for 2024.
  - Begin discussions internally & externally on how to accomplish the core public health services.
  - Start process for hiring new positions to do this work.
- Already did a great deal of "internal visioning" to ensure we know what exactly we do now and what might be needed to add the new programming.
- Prioritized various needs.
- Met with the Commissioners and County Council liaison to discuss things overall.
- Scheduled to speak with County Council in May, if the bills pass, to discuss the budget aspects.
- Other Departmental Updates
  - o Discussions regarding new building continuing.
  - o Annual reports for 2022 completed and distributed.
    - Many thanks to Matt LeBlanc for pulling it all together & distributing it, and to the division directors for their work on gathering the data and information.
- · What Else is Going On
  - o Vital Records
    - Gearing up for a busy summer of issuing birth certificates.
  - Clinical Services & Case Management
    - Getting ready to screen and treat over 75 new incoming refugees within the next 90 days.
    - About ready to pilot a residency rotation program with IU medical students starting in July.
  - Communications Division
    - Support Staff will be busy this summer assisting customers with permits for fairs and festivals.
    - The director will be continuing to promote public health and the work of the department through efforts such as attendance at health and safety fairs in addition to media-related requests.
  - Food & Consumer Protection
    - Fairs and festivals will begin in May and continue until the end of September which means hundreds of temporary food facility inspections.
  - Informatics
    - Will be hosting 4 students who will be working on 3 complex research studies.
      - 2022 data along with a 15-year overdose fatality review.
      - 10-year infant mortality study looked at infant deaths, infant birth data with infant deaths, infant mortality rate.
      - A fetal death study, looking at trends.
      - 20-year trend analysis on suicide deaths.
  - HIV/STD Prevention
    - Planning for various community outreach HIV/STD education and testing events.
  - o Finance

- Gearing up for the yearly budget development.
- Environmental Services
  - The mosquito control program starts at the beginning of May and runs through the end of September.
  - Getting ready for the start of summer by inspecting all seasonal public swimming pools.

# Personnel Report - Mindy Waldron

- Nick Bartkowiak was hired as an Environmental Health Specialist in the Food Division.
- Open Positions:
  - o One Environmental Health Specialist I position.
  - o One Disease Intervention Specialist HIV & STD Prevention position.
  - One Harm Reduction Coordinator and Medical Assistant Outreach Services position.

Presentation slides are available upon request.

# **Consent Agenda**

 Motion to approve the consent agenda was made by Dr. Cameron and seconded by Mary Hess. Motion carried unopposed.

### **Old Business**

None

#### **New Business**

None

Motion to adjourn was made by Mary Hess. Motion carried unopposed.

Adjournment: 7:04 p.m.

Next Board Meeting: July 17, 2023

Respectfully Submitted,

Thomas Gutwein, MD Health Commissioner

William Pond, MD Board President