

**CABELL-HUNTINGTON HEALTH DEPARTMENT**  
*Board of Health Regular Meeting – February 27th, 2019*

**Board Members Present:**

Daniel Konrad  
Danny Porter  
Donna Rumbaugh  
Fred Kitchen  
Robert Sweeney

**Board Members Absent:**

Kevin Yingling, MD

**Staff Members Present:**

Michael Kilkenny, MD, MS, Physician Director  
Tim Hazelett, Administrator  
Jack Mease, Accountant  
Kathleen Napier, Nursing Director  
Elizabeth Adkins, Health and Wellness Director  
Kim Lockwood, Epidemiologist  
Teresa Mills, Prevention Coordinator  
Rodney Melton, Chief Sanitarian  
Jaclyn Johnson, Threat Preparedness Coordinator  
Tonya Chaney, Regional Epidemiologist  
Laura Johnson, Secretary  
Michelle Perdue, Harm Reduction Coordinator  
Heather Wood, Nurse Practitioner  
Carol Simmons, RN

**Visitors:**

Bishop Nash, Herald-Dispatch  
KerryErin Coats, Intern

Mrs. Rumbaugh called the meeting to order at 5:00pm.

**Approval of Minutes:**

A motion to approve the January 2019 Board of Health meeting minutes as written was made by Mr. Konrad, seconded by Mr. Kitchen and approved.

**Environmental Health:**

Rodney Melton presented the Environmental Health report. Board of Health Directors congratulated Rodney Melton on his promotion to Chief Sanitarian.

**Threat Preparedness:**

Jaclyn Johnson presented the Threat Preparedness report. Mr. Kitchen asked if the number of attendees to the Homeland Security meetings is always four. Yes, the minimum number of staff attending every meeting is two.

### **Regional Epidemiology:**

Tonya Chaney presented the Regional Epidemiology report, which included regional epidemiological trainings and meetings held in the past month, field and partner education that was completed, and disease investigation and surveillance undertaken.

### **Nursing:**

Kathleen Napier presented the Nursing report. In January through February, we partnered with the State of WV on their project to vaccinate clients from the Huntington Treatment Center for Hepatitis A. Cabell-Huntington Health Department conducted outreach at the Huntington Treatment Center where 379 Hepatitis A vaccines were provided during clinics.

The number of Hepatitis A vaccines administered will be added to the monthly report. Mr. Konrad inquired if all clients receiving Hepatitis A vaccine get tested for all viruses? No, clients who only request immunizations do not get tested. Clients who go through the STD and Harm Reduction Program do get tested for diseases. Mr. Porter inquired on the number of clients who receive the first dose of Hepatitis A follow up with second dose. Most clients complete the two-dose series. Mr. Kitchen inquired if reminders are sent to patients. All clients receive a reminder of second dose at initial visit. The Hepatitis A outbreak was suppressed by first dose, with over 90% protection rate. General medical advice is to complete the two-dose series. Several restaurants have required their employees to complete the series and paid for both vaccines. Mr. Konrad asked if restaurants are requiring all new employees to get vaccinated. No, not all restaurants require Hepatitis A vaccinations. Mr. Sweeney inquired on the last time a food worker was diagnosed with Hepatitis A. November 2018.

### **Epidemiology:**

Kim Lockwood presented the Epidemiology report. Four cases of Hepatitis A were reported in January 2019. Mr. Konrad inquired on the January 2018 cases reported as zero. The first Cabell County Hepatitis A cases were reported in April 2018. No cases were reported for the previous five years prior to April 2018.

### **Harm Reduction Program**

Michelle Perdue presented the Harm Reduction report. Mr. Konrad requested the number of syringes that correlates with 257 pounds returned in January. 257 pounds is ~44, 204 syringes. We have observed a trend where a higher number of syringes have been returned than distributed. Mr. Sweeney inquired on where the syringes are being returned, handed in or drop box. The total syringe count is a combination of returned through program and drop box. The maximum number of syringes per client is 40, even if client returns more than 40. Mr. Kitchen inquired on the reason behind increase. Clients have stated they don't want to see them in the community. Not all syringes returned are from our facility. Mr. Konrad inquired on the number of syringe complaints. The number of complaints and number of syringes picked up has decreased. Mr. Kitchen inquired on the status of the Presteria peer to peer recovery coaches. The coaches are learning their role in the Harm Reduction Program. Every week they participate more in the clinic to get acquainted with clients. Tim Hazelett stated the agreement will be formalized next month.

### **Information and Technology:**

Tim Hazelett presented the Information and Technology report.

### **Health & Wellness:**

Elizabeth Adkins presented the Health and Wellness report. KerryErin Coats, an intern who will complete 180 hours, was introduced.

Teresa Mills announced the Coalition for Tobacco Free WV has allocated \$5,000 to Cabell-Huntington Health Department for tobacco prevention, education and cessation efforts. The Health and Wellness Department is working on a plan to best utilize the funding for awareness and prevention.

Teresa Mills updated the Board on the motivational interviewing pilot project being conducted in the Harm Reduction Program. All board members were recommended to attend the Harm Reduction Program and experience the dedication and passionate services provided by our nursing staff. Through the pilot project, clients are provided with the opportunity and 5 As assessment (Ask, Advise, Assess, Assist and Arrange) to link to cessation resources. Data has proven this population is more likely to use tobacco products. There is a population in our program who has indicated they do not and have never smoked. Mr. Sweeney asked if only cigarettes are addressed. No, vaping and dipping are also discussed. Dr. Kilkenny stated evidence shows an increase success rate when both drugs and smoking/tobacco use is stopped at same time.

**Financial Report:**

Jack Mease presented the January 2019 financial reports.

A motion to approve the departmental reports as submitted and presented to the Board was made by Mr. Sweeney, seconded by Mr. Konrad and approved.

**Administration:**

Tim Hazelett presented the Administration Report.

Jaclyn Johnson was commended for her work in threat preparedness. In March, five staff members will be attending the NACCHO Threat Preparedness Summit in St. Louis to present our Hepatitis A response through a poster presentation and National Town Hall Forum.

Executive Leadership was commended for their outstanding job in delivering the Departmental Business Plans. The four-year transformation has come to a point where departmental heads are now managing their own budgets and are held more accountable.

We have entered an internship program with Marshall University School of Public Health.

Changes to the Board of Health By-Laws were submitted prior to the meeting. Mr. Konrad made a motion to approve the changes as proposed. Mr. Kitchen seconded. Proposed changes to the Board of Health By-Laws were approved.

Performance Management will be presented at the March 2019 Board Meeting.

A motion to approve the Organizational Charts as presented was made by Mr. Konrad, seconded by Mr. Sweeney and approved.

**Physician Director's Report:**

Dr. Kilkenny presented the Physician Director's Report. Academic health departments work through MOUs and working relationships to complete work and research beyond the scope of their size. Through the internship programs, epidemiologic level research is much stronger, more accurate and valid as demonstrated through the John Hopkins University Bloomberg School of Public Health population study.

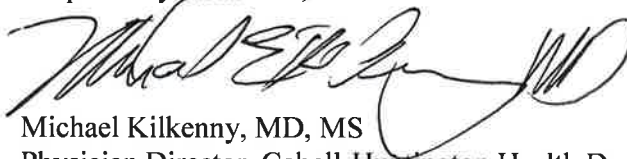
Dr. Kilkenny presented an update on the HIV Cluster. A cluster of HIV has been identified in Cabell County, primarily in the injectable drug use population, which marks a change in the risk factors from the traditional risk factors. An outbreak in the population is a serious risk. A public forum was conducted in collaboration with the state. The Board of Health has been briefed. The State conducted a large testing operation at the Cabell-Huntington Health Department. Over 200 individuals participated in testing and several positive cases were identified. The Cabell-Huntington Health Department has solidified a structure for response and are developing a plan, which will be presented to the Board by email once approved by state. Mr. Konrad asked for an estimated number of cases in

this cluster and how they compare to other areas such as Indiana and California. An estimate in cases can't be given, though we fully anticipate not having the number of cases near the realm of the outbreak in Scott County. Mr. Konrad asked we have an antiviral supply on hand. Our focus will be to identify case and link every case to care. We plan to utilize the existing providers and mechanisms already in place to obtain antivirals. The public health concept is to identify cases and treat to lower the viral load to non-transmittable state. This requires evaluation and treatment. Treatment is generally available through infectious disease specialists. Insurance pays for treatment. The drug manufacturing companies also have programs in place to cover the cost for those who do not have coverage. There is a transportation problem, in which we are establishing plans to address. Mr. Sweeney inquired on how long it takes to become noninfectious and if there is an educational component. It takes approximately one month of treatment to become non-transmittable. We are working on education. We will be educating on risk behavior and against stigma. Our goal is to alert the population of risk and direct those at risk to seek services. Mr. Sweeney inquired on how the cluster was discovered. This cluster was discovered by an increase in acute HIV disease. HIV is reported directly to the State. The State has requested our assistance in controlling the cluster. Mr. Kitchen asked if any other counties are experiencing cluster like this? This is nation-wide, not specific to Cabell County. There are strategies and tools in place to address situation. Cabell-Huntington Health Department has activated our All Hazards Plan to respond to cluster. We have formed an EOC (Emergency Operations Center) and virtually activated an ICS (Incident Command), which we will call Cabell-Huntington Health Command to respond.

Mr. Konrad made a motion to adjourn at 5:50pm.

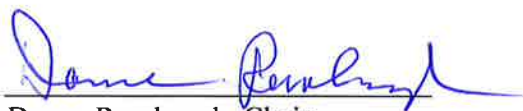
The next regular Board meeting is scheduled for March 27, 2019 at 5:00 p.m.

Respectfully submitted,



Michael Kilkenney, MD, MS  
Physician Director, Cabell-Huntington Health Department

Approved:



Donna Rumbaugh, Chair  
Cabell-Huntington Board of Health