

**TULSA CITY-COUNTY BOARD OF HEALTH
MEETING MINUTES**

January 16, 2019 at 6:00pm
James Goodwin Health Center
5051 S. 129 East Ave.
Tulsa, Oklahoma 74134

Board Members Present: Ann Paul, DrPH; Chair
Mike Jones, DVM; Chair
Chris Bell, JD, RN
Kian Kamas, MS
Regina Lewis, MD

Staff Present: Bruce Dart, PhD, Executive Director
Reggie Ivey, Chief Operating Officer
Scott Buffington, Employee Resources & Development
Priscilla Haynes, Preventative Health
Elizabeth Nutt, Environmental Health
Pam Rask, Adolescent & Child Health
Leanne Stephens, Marketing & Communications
Kelly VanBuskirk, Health Data & Policy
Jumao Wang, Finance
Jenna Grant, Executive Assistant

I. CALL TO ORDER AND WELCOME

Ann Paul called the meeting to order at 6:06pm.

The meeting notice and agenda were posted at the James Goodwin Health Center, the North Regional Health and Wellness Center, and the Tulsa City-County Health Department (THD) website, and they were emailed to the Tulsa County Clerk, the Tulsa City Clerk, and the Tulsa City-County Library on January 11, 2019.

II. APPROVAL OF MEETING MINUTES

January 16, 2019 Minutes

Ann Paul entertained a motion to approve the January 2019 minutes. A motion was made by Kian Kamas and seconded by Mike Jones. ***The minutes were approved:***

Ms. Bell	abstain
Dr. Evans	not present
Dr. Jones	aye
Ms. Kamas	aye
Dr. Lewis	aye
Mrs. Odom	not present
Dr. Paul	aye
Dr. Schumann	not present
Dr. Stout	not present

III. CHAIR’S REPORT

Ann Paul thanked board members and partners for attending the first meeting of the year. She had recently attended the Consumer Electronics show and did not see a lot of health advancements. Most health products were related to sleep. There were a lot of cross-over items, like Panasonic producing a refrigerated food locker where groceries could be delivered and picked up at the customers’ convenience. Bosch had a self-driving car, as did all the car companies. 3D printing was big, even printing rechargeable batteries. A section of the exhibit hall was devoted to resilience technology, however there did not seem to be clear understanding of what resilience is.

Security was a strong theme. As was connectivity, like connecting data analysis from the home and car to provide health updates on its users. Or facial recognition software for emergency response workers to quickly identify and treat someone having in a health crisis. It is intimidating, but there are opportunities too. Some of the technology could be useful in public health.

Later in the agenda there would be a discussion on planning for the future. The Board of Health needs to define its goals and look for resources to help THD spring ahead of what it currently does. It is important to have this conversation and get board support.

IV. DIRECTOR’S REPORT

Bruce Dart said the future is on everyone’s mind with Oklahoma’s new governor and the health commissioner being unknown. Bruce agreed with what Ann said about planning for the future. He added that THD had been good at meeting individual needs but it was time to make real change and address systemic problems that negatively impact health.

As part of that, in the summer the Board of Health would have a retreat to look at how to best help the zip code areas in Tulsa with the worst health outcomes.

V. CURRENT BUSINESS – Information Items

A. Financial Report – Reggie Ivey

1. Revenues were higher than anticipated:

- Ad valorem taxes were budgeted at 2%, but had earned closer to 2.5-2.7% in recent years. In the FY20 budget the tax revenue would be calculated at the higher rate.
- Food license fees and permits had increased, bringing \$146,000 more revenue.
- George Kaiser Family Foundation paid grants to BEST and Little by Little in a lump sum for the full year, instead of paying monthly as they had in the past.
- Interest on the fund balance was also up. Tulsa County designates how the money is invested.

2. Expenditures were different than expected:

- An additional \$35,000 was spent on Communications in November to repair the phone system.
- Unfilled job openings meant less money was expended for salaries, benefits, travel, and training.
 - In the last year 15 employees had resigned and 6 had retired.
 - The Accountable Health Communities program delayed in hiring new staff until their data system was implemented and more clinics were referring clients; they would soon be fully staffed.
 - The Children First program was having difficulty finding nurses to conduct home visits.
- Spending on medical supplies was higher in the quarter because programs replace stock early in the fiscal year.
- Printing/film/duplication was under budget because many departments wait until later in the fiscal year to spend on promotional items.

3. The total fund balance was \$19 million and was expected to be \$17 million by the end of the fiscal year. This is the highest it has ever been.

- A written plan would be created by the end of FY19 to determine how to best allocate those funds. For example
 - The emergency fund currently has \$500,000 but ideally should have \$5 million to address a community-wide health emergency.
 - THD has aging facilities and more money is needed in the capital fund.

B. 2019 Board of Health Opportunities

1. Board Retreat

The 2018 retreat focused on Tulsa zip codes with the highest morbidity and mortality rates. In the past THD has been very program specific. However, addressing a singular need does not change the environment that contributes to poor health outcomes. For 2019 the focus will be on how to best address those issues and work towards infusing health equity and accountability through all goals.

- As part of the Saint Francis project Mike Stout is conducting focus groups in the high risk zip codes. His research would be complete in early May.
- Consultant Laura Runnels will facilitate the retreat. She will be asked to send best practices from other boards of health that have improved health outcomes. She will also phone board members in advance of the retreat to get their input.
- The retreat will be on a Friday afternoon and all day Saturday. A poll would be sent to find the best date between mid-May and mid-June 2019.

2. Board Goals

Making Tulsa the healthiest county in the country (#1 in 10) has been discussed in the past. Now we are ready to create a specific plan to make that happen. THD employees are being asked how they contribute to the organization's vision. Departments are setting SMART goals focused on the vision. Board of Health input was needed to set overall goals and direction.

Kian Kamas asked about the equality indicators identified by the Community Service Council. Reggie Ivey said their report had a broad focus and it would be more effective to lend resources to those places with the most need.

Bruce Dart said a health strategy agenda is needed. Kian asked how it would differ from the strategic plan or Community Health Improvement Plan (CHIP). Bruce clarified that the strategic plan sets internal goals and the CHIP has a small focus. Ann Paul said she has a tool to create a health strategy by determining results and setting objectives to achieve them.

Mike Jones raised the issue of connecting people to resources. Connecting is the hard part. If there is not a connection, even the best plans are never used. It is better to have peers share about services than to pay someone to do it. Bruce said it would be key to work with organizations and coalitions in these areas. At the retreat he sees the board setting the goals, then THD leadership can fill in the blanks. A lot of different groups are trying to make improvements, but efforts are not coordinated. That is an important missing piece.

Reggie Ivey said having good data is important to develop a plan:

- The zip code data from last year's retreat would be sent again to the full board.
- THD staff is working on a resource map showing existing social services the high risk areas have.

- St. John Health System will have data from the Community Health Needs Assessment in the near future.
- Ann Paul will also share relevant research and information from her doctoral program.
- Kian Kamas will speak to James Wagner about City Voice data. He may be available to present it at the board retreat.

Kian added how important it is to keep goals manageable. If there are too many it will be difficult to achieve any of them fully.

Mike Jones said that one plan may not be perfect for everyone. Plans may need to be tailored to the needs of Tulsans in different areas.

3. Board Relationship with Oklahoma State Department of Health (OSDH) – Bruce Dart

Due to new statutes OSDH is no longer self-governing. Governor Stitt has not yet appointed a Health Commissioner and may be considering combining that position and the Secretary of Health.

Mike Jones asked what the governor’s stance is on health. Bruce said Governor Stitt’s perspective on public health and Medicaid was still evolving.

Chris Bell asked if there was value in THD having more autonomy from OSDH. Bruce responded that true autonomy would have to be defined and granted statutorily. OSDH had recently been much more helpful in providing data to THD.

Regina Lewis asked if the federal government shutdown was impacting public health. Bruce responded that it would begin affecting OSDH’s SNAP benefits in February. THD does not offer SNAP. It does offer federally funded Women Infant and Children (WIC) benefits. WIC is still accepting clients and has money to continue through the end of March.

VII. ADJOURNMENT

The meeting adjourned at 7:23pm.

APPROVED:



Ann Paul, DrPH, MPH, Board of Health Chair

ATTESTED:



Jenna Grant, Tulsa Health Department Assistant