

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

May 17, 2017 at 6:00 p.m.

North Regional Health & Wellness Center
5635 N Martin Luther King Jr Blvd, Room 208
Tulsa, Oklahoma 74126

Board Members Present: Kian Kamas, M.S., Chair
Christine Bell, J.D.
Deb Greubel, DNP
Patrick Grogan, DVM
Larry Lander, D.D.S., J.D.

Staff Present: Bruce Dart, Ph.D., Executive Director
Reggie Ivey, Chief Operating Officer
Chanteau Orr, Legal Counsel
Scott Buffington, Employee Resource & Development
Elizabeth Nutt, Environmental Public Health
Pam Rask, Adolescent & Child Health
Priscilla Haynes, Preventative Health
Kelly VanBuskirk, Health Data & Policy
Kaitlin Snider, Marketing
Jumao Wang, Finance
Jenna Grant, Executive Assistant

Others Present: Dr. Terry Cline, Oklahoma State Department of Health
Scott Adkins, Legislative Liaison
Jeffrey Alderman, University of Tulsa

I. CALL TO ORDER AND WELCOME

Kian Kamas called the meeting to order at 6:02 p.m. The meeting notice was posted at the north and south entrances of the James O. Goodwin Health Center and the west entrance of the North Regional Health and Wellness Center and also emailed to the Tulsa County Clerk, the Tulsa City Clerk and the Tulsa City-County Library on May 11, 2017. The agenda was posted and emailed to Tulsa County Clerk, the Tulsa City Clerk and the Tulsa City-County Library on May 12, 2017.

II. APPROVAL of April 19, 2017 MINUTES

Kian Kamas entertained a motion to approve the previous meeting minutes. A motion was made by Larry Lander and seconded by Chris Bell. *The minutes were approved:*

Ms. Bell	abstain
Mr. Goodwin	not present
Ms. Greubel	aye
Dr. Grogan	abstain
Ms. Kamas	aye
Dr. Lander	aye
Dr. Lewis	not present
Mrs. Odom	not present
Mrs. Paul	not present

III. CHAIR’S REPORT

Kian Kamas said the committees are coming together. Finance Committee has met twice, to review and finalize the FY18 budget. The Executive Committee had its first meeting just before the Board of Health meeting. Kaitlin Snider was working on setting the first CHIP Committee meeting.

On May 30th Bruce would travel with city officials and business leaders to Fort Worth to learn about its Blue Zones program. Kian hoped to hear about it at the Board of Health meeting in June.

IV. DIRECTOR’S REPORT

Bruce Dart looked forward to the budget presentation later in the meeting. He thanked the Finance Committee, Reggie Ivey, Jumao Wang and their staff for doing a great job on it.

The Accountable Health Communities (AHC) grant, administered by THD, MyHealth and the Oklahoma State Department of Health, was working to hire a project manager. The program would have six months of planning before implementation in January 2018. This grant was a big step forward in addressing the social issues that impact health. It was critical the program be done well.

Kian mentioned the Tulsa Chamber was hosting a healthcare forum in July and the Accountable Health Communities grant would be shared there. The forum was open to the public and more information would be shared so board members could attend.

V. CURRENT BUSINESS – Information Items

A. Tulsa’s 10 Year Mental Health System Plan – Jeffrey Alderman

Jeffrey Alderman was the founding director of the University of Tulsa’s Institute for Health Care Delivery Sciences. They are leading efforts to create the Tulsa Regional Mental Health Plan, which will assess services available to people with mental illness,

address gaps, and create better options. The program was funded by the Anne and Henry Zarrow Foundation.

Nationally Oklahoma has the second highest percentage of people with mental illness and substance abuse disorders, most who go untreated. Oklahoma also spends less than most states on mental health. There are about a million Oklahomans dealing with mental health disorders and that understandably impacts our healthcare system, schools, justice system, and prosperity. Currently Oklahoma had one psychiatrist for every 14,000 people and would need 321 additional doctors to reach the national average.

Instead of recruiting more psychiatrists, it may be better to think strategically about how to get care to those in greatest need. In the past the Department of Mental Health showed hotspots of chronic health conditions. Suicide rates were highest downtown and in sections of North Tulsa. Midtown had the highest rates of opioid use. The Lumen report showed health rates in these areas had improved in recent years. It was time to consider the same data from a mental health perspective, especially in managing serious mental health issues like bipolar and schizophrenia.

Some of the program's findings:

- Mental illness contributes to poor health; a mentally ill person has a 20 year shorter life expectancy.
- The ways treatment is delivered varies a lot. It is difficult for people in poor communities to get help, but there are so few resources it is difficult for people from affluent areas to find treatment. The system is fragmented and often the "stars have to align" for a patient to get quality care.
- Mental health providers do not have good communication with other providers.
- Treatment consists primarily of prescription medication. Patients say they want job and volunteer opportunities and peer groups.
- Some community groups like CREOKS does a great job, but they do not work with school counselors or officials.

The challenges are many, but so are the solutions. Goals include:

- Concentrating resources where they are most needed.
- Building on programs that are already doing well in Oklahoma, like Drug Court and Mental Health Court, which have higher success rates than psychiatric hospitalization and prison.
- Considering interventions in Tulsa area schools to prevent schizophrenia and substance abuse.
- Using community health workers to help people access treatment.
- Finding ways to train physicians, medical students, and other healthcare workers to treat mental illness. Psychiatrists could be the team leaders with other professionals providing direct care. (Deb Greubel mentioned it could be a great opportunity for nurse practitioners.)

The program's goal is to have the 10-Year Plan ready to implement by January 2018.

B. Legislative Update – Scott Adkins

The regular state legislative session would end May 26. If the budget was not finalized then a special session would need to be called. There was still an \$800 million budget shortfall. Governor Fallin would not approve a budget with significant cuts, requiring raising revenue, which would be difficult in current political climate. The Cigarette Fee was a lynch pin on every issue and it was unlikely there would be a final budget without including the \$1.50 per pack increase on cigarettes. But it required a $\frac{3}{4}$ majority vote, which seemed unlikely. (Majority was not adjusted though several seats were open.) The Cigarette Fee could pass at a lower rate, of perhaps \$.75 per pack. That would raise revenue, but unfortunately not have the desired impact of deterring smoking. Money raised would likely be used to fund education, Medicaid and other areas of need.

Dr. Cline gave an update on funding for a new public health lab. The bill asking for \$58 million, paid over a 20 year bond, was waiting to be heard in Senate. The current lab does 60,000 test a year. Because the facility was outdated and in poor repair, it was about to lose accreditation and would shut down. Legislators were notified three years ago a new building was needed. Scott Adkins said it was a testament to Dr. Cline's team that the bond was still alive in a tight budget year. It looked likely to pass, and once built would be supported by fees, not state appropriations.

VI. CURRENT BUSINESS – Action Items

A. FY18 Budget for the Tulsa City-County Health Department – Reggie Ivey

There had been only one change from the preliminary budget presented in April. Under the grant budget cuts, the TSET program (reducing tobacco use and obesity rates) would have a 5% decrease, not 10% as listed previously.

Because some board members were not at the April meeting, Reggie gave an overview of the full budget:

- The FY18 proposed budget was \$28,381,567, including a 2.06% increase in expenditures from the current year.
- Total TCCHD funding (permit fees, patient fees, and miscellaneous income) would increase 9.91%. The total private, state and federal revenue was expected to increase 0.08% in FY18.
- It was projected that ad valorem tax revenue would increase about 2% (conservative estimate of \$278,396) from the current year.
- Partial funding of the \$4.5 million Accountable Health Communities grant would also be received in FY18.
- The budget included a transfer from the general fund to the capital fund, increasing the capital account to about \$1,000,000. This would be used in FY18 for much needed renovations at the Central Regional Health Center and Sand Springs Health Center, as well as AV and security upgrades at all locations and the purchase of a new mosquito spraying truck to replace a 1995 vehicle. The capital fund was also being built up in anticipation of large capital

improvements, including \$1,000,000 to replace the roof on the James O. Goodwin location, which would be needed within the next three years.

- In FY18 employee health insurance premiums would increase 6.62% and it was proposed that the increase be shared between THD and its employees.
- A 2% salary adjustment was included to help recruit and retain employees.
- Some expected grant budget cuts for FY18:
 - TSET (reducing tobacco use & obesity) grant – decreased 5%
 - Healthy Start Initiative – decreased 10%
 - Immunizations – decreased 30%
 - Family Planning – decreased 3%
 - PREP (Teen Pregnancy Prevention) – decreased 2%

Dr. Grogan asked what practical impact the 30% cut in Immunization’s budget would have. Reggie said THD laid off three field consultants to accommodate the reduction. There would still be full services in the Immunization clinics at THD.

Kian shared that the budget was reviewed at two Finance Committee meetings. She thanked the Committee and gave special thanks to Reggie Ivey and Jumao Wang.

Kian Kamas entertained a motion to approve the Board of Health’s support of the application. A motion was made by Deb Greubel and seconded by Larry Lander.

The Tulsa Health Department FY18 budget was approved:

Ms. Bell	aye
Mr. Goodwin	not present
Ms. Greubel	aye
Dr. Grogan	aye
Ms. Kamas	aye
Dr. Lander	aye
Dr. Lewis	not present
Mrs. Odom	not present
Mrs. Paul	not present

VII. ANNOUNCEMENTS

The next Board of Health meeting was scheduled June 21, 2017 at the James O. Goodwin location.

VIII. ADJOURNMENT

The meeting adjourned at 7:20 p.m.