

MEETING MINUTES
Tulsa City-County Board of Health

February 21, 2024, at 6:00 pm

North Regional Health and Wellness Center
5635 M.L.K. Jr. Blvd.,
Tulsa, OK 74126

Board Members Present:

Regina Lewis, D.O., Chair
Mike Stout, PhD.
Krystal Reyes, MPA
Mike Jones, D.V.M.
Ann Paul, DrPH, M.P.H
Mousumi Som, D.O.
Sarah-Anne Schumann, M.D., M.P.H.

Staff Present:

Bruce Dart, Executive Director
Reggie Ivey, Associate Executive Director
Marcus Anderson, Assoc. Director of Maternal & Child Health
Chanteau Orr, Assoc. Director of Human Resources & Legal Services
Sara Rodriguez, Executive Assistant
Leslie Carroll, Assoc. Director Office of Community Health & Quality Improvement
Julia Profit-Williams, Assoc. Director Office of Preventive Health Services
Ashley Bailey, Epidemiologist
Kelly VanBuskirk, Assoc. Director Office of Prevention, Preparedness, and Response
Scott Adkins
Alexandra Adkins
Meenakshi Krishnasamy

1) Call to Order & Roll Call – Dr. Regina Lewis

Dr. Regina Lewis called the meeting to order at 6:03 pm.

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 emailed to the Tulsa County Clerk, the Tulsa City Clerk, and the Tulsa City-County Library on February 15, 2024.

2) Approval of Minutes – Dr. Regina Lewis

Dr. Regina Lewis entertained a motion to approve the January 17, 2024 minutes. A motion was made by Ann Paul, Dr. PH, MPH, and seconded by Mo Som, D.O. ***The January 17, 2024 minutes were approved:***

Dr. Stout	aye
Dr. Lewis	aye
Dr. Paul	aye
Ms. Boyer	not present
Dr. Som	aye
Dr. Jones	aye
Dr. Schumann	aye
Ms. Reyes	aye
Dr. Galles	not present

3) Chair’s Report – Dr. Regina Lewis

Dr. Lewis thanked the Board for nominating her as the chair. Dr. Lewis asked for everyone’s grace, she stated that just today she’s been trying to get everything together and caught up because she has been out of the country for the last two weeks and the week before that she had a death. A good friend’s son committed suicide. Dr. Lewis brought this up because Tulsa is building a Mental Health Hospital, hopefully, if it stays on track, it could be open by the end of the year. This hospital will not only be for teaching purposes but also a dedicated place for patients to go without going to the ER. Patients are going to the ER and if no beds are available, the patients are housed until a place in the State of Oklahoma is found where they can go. Having this Mental Health Hospital allows patients to get taken care of. Dr. Stout shared the tragic story of the young adult from Owasso who would have benefited from a Hospital like this. Dr. Lewis just came back from Xela, Guatemala where they are trying to help women understand mental health. Teaching these women that it is okay to go to counseling and talk to someone with sexual and physical abuse happening at home. Dr. Lewis asked for grace and prayers as she will do her best to adjust her schedule and will not go out of the country again until maybe November. Dr. Lewis congratulated Dr. Som on being nominated as Vice Chair.

4) Director’s Report – Bruce Dart

Dr. Dart welcomed Dr. Lewis in her new role as the Chair of the board. Dr. Dart stated that the Tulsa Health Department works to engage with the mental health community and health providers. Dr. Leslie Carroll has done a great job keeping engaging and keeping the community involved with the CHIP program. In conjunction with what Dr. Lewis was saying we are in a positive movement. Dr. Dart shared that he met with Dr. Hubbard, the new Chief of Mental Health Officer for the City of Tulsa last week. Dr. Dart introduced the Board to Julia Profit-Williams (JP) as our new Associate Director for Preventive Health Services.

5) Tulsa Health Department Reports

A. James Goodwin Health Center Remodel Project – HFG Architects

Meenakshi Krishnasamy with HFG Architects introduced himself to the Board. Meenakshi specializes in healthcare facilities with a lot of hospitals and has been involved in designing a lot of healthcare-related projects. HFG won the bid for this project at JGHC. Meenakshi went to school at OU to get a master's degree in Architecture. Meenakshi moved to Tulsa and has been a practicing Architecture for the last 22 years. Meenakshi has worked with Food Protection at the Tulsa Health Department (THD) getting permits for restaurant establishments but this is the first time working directly with the Tulsa Health Department. Meenakshi is very happy to be a part of this project and to work with Mr. Ivey and the amazing team. Meenakshi gave a quick overview of the James O. Goodwin remodel going over introductions, goals, interior layout modifications, exterior layout modifications, materials, finishes, project schedule, and construction costs. The building was built in the 80's for a lab and in 1998, THD remodeled and moved in. This will be a major remodel for THD. There are 18,500 square feet of interior and exterior remodeling of the North public entrance which is very challenging with the ramp. The main goal is to have interior and exterior workflow accessibility in terms of ADA, room layout, waiting area, and staff launch. For the exterior: accessibility, protection from the weather, a better ramp design, and a clear entrance image. The new proposed design was demonstrated to the Board and the idea is to bring clinical services and vital records together for better access and flow. The water lab areas have offices, a clerical space, and an area for water samples to be dropped off. A flow chart was shown to the Board to demonstrate how the flow in the Environmental area will be accessible and clear for clients when navigating the services needed. Due to how the building was originally built, there is a huge elevation difference. The exterior of the ramp is a challenge because of how far it is from the entrance to the building. The new exterior will bring the building closer to the parking lot and the ADA compliant ramp will have a cover to protect clients from the weather. We will be keeping the integrity of the design with the towers outside the building because they are part of the ventilation system. For the material and finishes, we took guidance from Mr. Ivey and the team and the color scheme will be the same as the other THD facilities. A drop ceiling will be added, and they will try to use the same skylights throughout the building. The project schedule started in November, and we will finish the design and drawing in the first week of April. The bidding and permitting will start and then go to the City of Tulsa for Plan Review and Permitting which takes about six to eight weeks. The projected construction start date is June and a 12-months of construction is anticipated. Once we have a contractor on board, they can give the actual construction timeline. Mr. Ivey is working on the selection of contractor construction managers and once they are on board, they will help with the approximate cost of the project, look at our design, and provide the exact cost estimations of the project. HFG gives the opinion of the probable cost of the project, this is not an actual cost, this is just an architect's opinion. We base cost on recent projects, so this is not an exact scientific cost estimation, but it gives you an idea. The site and building costs are 2.7 billion and we will work closely to get the estimated cost together.

B. Infectious Disease Update – Ashley Bailey

Ms. Bailey introduced herself as an Epidemiologist with THD. Ms. Bailey explained that she would be sharing what they are currently seeing out in the community, especially in Tulsa County. The epidemiological team has a data-reporting page called Tableau that is updated every Thursday. Data is specific to Tulsa County and is available on the THD website. "While each flu season is unique, it looks like we are trending back to pre-pandemic times. Last year we saw an earlier and sharper peak, than what has been captured so far this year which appears to have peaked later in the season with a wider peak, but we still have a few weeks left to go." Both seasons are very similar to those of pre-pandemic years. Current hospitalizations: 567. Current deaths: 13. Last year's hospitalizations: 616. Last year's deaths: 17. OSDH has a new program called Viral View with

data specific to COVID-19, Influenza, and RSV. These respiratory viruses are also monitored via wastewater surveillance which normally predicts trends 2-3 weeks before they are seen in the community. While we are seeing more cases in our pediatric population, the majority of hospitalizations are in the 65+. COVID-19 has plateaued in cases. A majority of the cases are being seen in the 18 - 49 yr. old population, but similar to the Flu, those who are 65+ are involved in most hospitalizations. The current variant is called J.N.1 and is expected to continue the increase seen concerning variant of interest. The variant is under the BA.1 variant with similar mutations. The symptoms are the same as the previous variant and the booster *does* cover this variant. COVID-19 recommendations have changed as of 3/4/2024. We want to stay pro-active and aware of any possible changes in recommendations. The recommendations are: stay home until you are fever-free and symptoms decrease for 24 hrs. RSV cases are decreasing in numbers. This is the first season we have had vaccines available. They are available for pregnant women, eligible children, and older adults. While we view cases in the Southern Hemisphere to find an indicator of what our season may look like, it is not perfectly accurate. Our goal is to focus on both prevention and mitigation of the impact of illness through community engagement and providing the community with data to make informed decisions. The Epi team partners with the MC&S team and the Don't Bug Me campaign offering materials and education in both English and Spanish. While we have banners, activity booklets, stickers, etc. for distribution, we have created Respiratory Kits available for all ages when attending events. Items in the packets include: DBM tissue packets, DBM stickers, hand sanitizer, disinfectant wipes, hand sanitizing wipes, an individually wrapped face mask, cough drops, and a disposable thermometer. We launched our Epidemiology Stakeholder's Newsletter with the support of MC&S. This Newsletter is published quarterly and focuses on data currently being seen, what to expect in the next season, and how to prevent infection of relevant diseases. While most individuals do not visit the doctor for Norovirus, it is a major source of outbreaks at LTC, schools, restaurants, and cruise ships. Norovirus cases have increased significantly in recent years. While it is not a reportable illness, we do monitor this data from CDC's Noro stat for situational awareness and have seen that December and January are usually the months with the most cases due to the holiday season. The Epi team has a Hand Hygiene curriculum we have developed to further increase the awareness of hand hygiene practices and the spreading of germs. We also have Hand Hygiene kits that are distributed to the public. Items in the kit include biodegradable towelettes, soap petals, hand sanitizing wipes, cuticle sticks, a nail brush, and alcohol wipes. Resources are double-sided in Spanish and English. MPOX cases have decreased dramatically since last summer, but there continues to be cases reported sporadically in the US. OK has had 84 reported cases since 2022. We have seen that the warmer months are generally when we see an increase in cases. Following the CDC's guidelines, we continue to spread awareness of vaccinations to prepare for the summer months. We use the RedCap system for contact tracing and rash consultations and offer recommendations to medical staff for further guidance. We have Safer Sex kits to combat further spread and raise awareness of prevention that are distributed at relevant community engagement events.

C. 2024 State Legislative Update – Scott Adkins and Alexandra Adkins

Scott Adkins stated that it was great to see everyone after weeks at the Capitol. Mr. Adkins congratulated Dr. Lewis on her new role as Chair. We have evolved into a system to try to track legislation. Every year in the State of Oklahoma there are at least 3,000 or so bills roughly introduced. This is the 2nd year of the Legislature, so everything that was not killed by vote the previous year is back alive in the current spot where it was sitting last year. Alex and I are dealing with about 6,000 live pieces of Legislation. It is now a team effort, Alex works on a comprehensive tracking list of Legislation every week, but in conjunction with that Chanteau looks at the beginning of every Legislation session and shares with Dr. Dart what we think in Tulsa could be a priority. At the same time the Oklahoma State Department of Health (OSDH) is tracking Legislation as well. Alex has a great relationship with their team at OSDH and the Oklahoma City-County Health Department has an excellent team of Government affairs that they work with, and they have a tracking system. We have evolved now and have multiple eyes and resources watching at Legislation. We are not as surprised as we used to be. 2024 is an election year but our state officers are not up for election. All 101 house members and

half of the Senate is up for re-election in the fall. One thing that complicates things a lot during the Legislative Session, is the failing dates are accelerated and moved up, for candidates to file for office. So, most of these legislators are filing for office during the Legislation Session in April and June. We have about a 14-billion-dollar state budget some of this is the acceleration of funds due to COVID-19, but we still have a surplus. The Governor and the House want tax cuts. The Senate wants to maintain the status quo. We are fortunate because of COVID-19 and the influx of money that our savings account is at 4 billion dollars on a rainy day and constitutional reserve funds. The Legislature by Constitution must be convinced by the first Monday of February and must adjourn by the last Friday of May. Oklahoma has a balanced budget in our Constitution, so they must balance the budget every year. We have been in the middle of two special sessions discussing the tax cuts. Alexandra Adkins talked about some of the specific bills. There are a lot of vaccine bills that are coming out. This has been seen a lot across the Country. Mandates for vaccines seem to be a national consensus because the same people who had been advocating for them took the last year to advocate for school choice. There is not a lot of traction on these bills. Our more conservative members want to look at vaccine and vaccine exemptions. Alex has been visiting with OSDH to discuss where these bills are going. Our committee Chair in the House and Senate has said we are willing to discuss vaccine exemptions but only with the OSDH signing off. They are working to find some source of consensus, but they do have the veto power to make sure that these vaccine bills, as they are written, are not going too far. OSDH has been discussing the Sex Education bills and Alex has been talking to OSDH about them. These bills are moving, but most members do recognize that these bills are crazy. As the measures are written down it would be very difficult to pass. We are keeping an eye on these bills in case they gain any traction. The OSDH has one bill re-working the code about public pools and spas. We are working to fix or revive some of the bills that were either vetoed or died because of casualties of politics last year. The Community Health Workers' discussion is coming back. We will get more support from Community Health Workers from the healthcare/managed care perspective and hopefully we will see this bill go through despite the veto. The Handling With Care bill was also vetoed. This bill talks about our schools intervening if the child has contacted 911 or had a tragic experience the night before, the teacher could handle the child with extra love and/or space whichever is needed. The Re-addressing of corporate punishment in school to children who are intellectually disabled brings this discussion back up. The Hope Shaffer Act is to notify parents when kids are in driver's ed and another student would be driving. The Child Work Task Force put out some recommendations and is getting some attention from the executive legislation and prominent legislators. Uniform eligibility and enrollment through DHS, SNAP, and TANF are getting a one-stop uniform enrollment for individuals that qualify. Also working on other languages that are accessible and working to make this a one-stop shop for individuals who do not have access online. Also, working on the Child Specialty Plan to ensure families around that and expanding so children can be eligible under Sooner Select. Looking at ID's for those experiencing homelessness, especially children leaving OJA custody to make sure they have all the identification needed to be successful. Miller has a voluntary autism designation on the driver's license if a person comes in contact with law enforcement. This lets the officer know that this person has autism and has a different presentation than what the typical officer is used to. A lot of school lunch bills were filed. Cardiac emergency response plans that the American Heart Association is doing for our student-athletes has also been discussed. The schools need to be prepared for all cardiac emergencies if there is an incident on the field/court. A lot of childcare tax incentives for employers, tax incentives for opening childcare facilities, as well as maternity leave for state employees in public education, will be expanded to a larger population. The Modern Task Force is looking at bills of justice reform that are coming out, one is related to public health and is looking at outpatient treatment as an alternative.

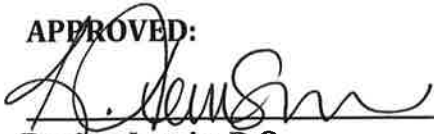
6) Announcements – Dr. Regina Lewis

The Next Board Meeting is Wednesday, April 17th at 6:00 pm at the James O. Goodwin Health Center in Room 200.

7) Adjournment

The meeting adjourned at 7:07 pm.

APPROVED:



**Regina Lewis, D.O.
Board of Health Chair**

ATTESTED:



**Sara Rodriguez
Tulsa Health Department Executive Assistant**