



**State Board of Health  
State Board of Senior Services  
Meeting Minutes**



**September 14, 2010  
Director's Office Conference Room**

**Board of Health Members Participating:** Annette Slack, Joseph Forand

**Board of Senior Services Members Participating:** Mary Anne Brown, Barbara Gilchrist, Ann Bannes, Carol Gosselink, Edna Chavis

**DHSS Staff Present:** Margaret Donnelly, Nancie McAnaugh, Scott Clardy, Bill Whitmar, Barb Wilbers, Patrick Lynn, Celesta Hartgraves

TOPIC	DISCUSSION	ACTION
<p><b>Welcome</b> <i>Margaret Donnelly</i></p>	<p>Margaret opened the meeting by welcoming all board members who have joined the call and proceeded to take roll call. She also welcomed and introduced staff participating at DHSS.</p>	<p>FYI</p>
<p><b>Department/Budget Update</b> <i>Margaret Donnelly</i></p>	<p>There is some good news in that the revenue decline seems to be slowing. The decline in August was not nearly what it had been in previous months. This means that we are not being given any instructions or indications that we will be sustaining any further cuts for this fiscal year, other than the cuts we've already sustained. This is good for us. We have positions in all of the divisions that were put on hold and we are slowly putting them back on line. We, of course, are looking ahead and beginning the process for next year's budget that will begin July 1, 2011. Again we do not anticipate any growth and we will not be proposing any new initiatives that will require new state funding. We may have some initiatives in the policy areas.</p> <p><b><u>Affordable Care Act</u></b> We have successfully applied for two grants for which we've already received funding and we continue to look at additional opportunities. Grants include:</p>	<p>FYI</p> <p>FYI</p>

	<ul style="list-style-type: none"> <li> <p>• <u>Grants for Maternal, Infant, and Early Childhood Home Visiting</u>  Funding Opportunity Announcement (FOA) was released on June 10, 2010 and due to Grants.gov on July 9, 2010. DHSS submitted the application on July 7, 2010. DHSS received award notice from HRSA on July 28, 2010 of \$1,500,096. All but \$500,000 of the allocation is restricted, and funds will not be available for expenditure until an approvable needs assessment and updated state plan for the home visiting program is submitted. The unrestricted funds can be used for planning, identifying data sources, developing the mandatory needs assessment, identifying technical assistance needs from HHS, and developing a state plan on early childhood home visiting based on the results of the needs assessment. A second FOA was released August 19, 2010 and due September 20, 2010. The second FOA provided full specifications for conducting a collaborative needs assessment. DHSS submitted the needs assessment to HRSA September 17, 2010. The third FOA is expected in September and will be due early FFY 2011 and will provide instructions for submitting an Updated State Plan for responding to the results of the Needs Assessment.</p> </li> <li> <p>• <u>Strengthening Public Health Infrastructure for Improved Health Outcomes</u>  Component I: Graduated Base Grant for public health performance management</p> <p>Component II: Competitive grants for public health systems transformation:</p> <ol style="list-style-type: none"> <li>a. Performance Management,</li> <li>b. Policy and Workforce Development,</li> <li>c. Public Health System Development/ Redevelopment, and</li> <li>d. Best Practice Implementation</li> </ol> <p>Application due date was August 9, 2010 with an anticipated award date of</p> </li> </ul>	
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	<p>September 30, 2010.</p> <ul style="list-style-type: none"> <li>• <u>Epidemiology – Laboratory Capacity Grants</u> Grants to eligible entities to assist public health agencies in improving surveillance for and response to infectious diseases and other conditions of public health importance.</li> </ul> <p>Application due date was August 27, 2010 with an anticipated award date of September 30, 2010.</p> <p>We have also submitted/are working on three grants dealing with teen pregnancy:</p> <ul style="list-style-type: none"> <li>• Support for Pregnant and Parenting Teens and Women</li> <li>• State Personal Responsibility Education Program (PREP)</li> <li>• Title V State Abstinence Education Grant Program</li> </ul> <p><b><u>Money Follows the Person</u></b> We have had success in expansion to our money follows the person program. The program is designed to offer a comprehensive, coordinated system for information and referral to, as well as awareness of, services for older adults, adults with disabilities, and family caregivers. It will aid folks by providing comprehensive information and referral assistance; options counseling; long-term care planning; person-centered care transitions; and assuring quality improvements. Hope to provide individuals with the options available to them as they transition from the hospital back to community living. The Department is working in partnership with the Departments of Social Services and Mental Health on this program.</p> <p><b><u>Missouri Health Information Organization (HIO)</u></b> The HIO has articles of incorporation that</p>	<p>FYI</p> <p>FYI</p>
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	<p>have been filed and Margaret serves on that Board. There is a lot of money coming into the state and there are definitely opportunities in public health with respect to reporting of lab data.</p> <p>It's a very busy time in terms of these very large health initiatives.</p>	
<p><b>Legislative Update</b> <i>Patrick Lynn</i></p>	<p>Margaret commented that the department has begun its discussion with the Governor regarding legislation for the upcoming session. She asked Patrick to share some of what the Department would like to propose.</p> <p>Patrick indicated that we are getting started and that the department has put forward some ideas and the Governor's Office has put forward some ideas and we will finalize, in the near future, those that we will go forward with. Some things we are looking at include:</p> <ul style="list-style-type: none"> <li>• Food Safety</li> <li>• Ban on Bisphenol-A</li> <li>• Prescription monitoring</li> <li>• Housing codes for seniors and disabled</li> <li>• Lodging regulation revisions</li> <li>• Background screening for long-term care employees</li> </ul> <p>Scott Clardy touched on SB 1007 from the 2010 legislative session which amends sections 172.850, 199.010, 199.200, 199.210, and 199.230-199.260, RSMo. These amendments make the Department of Health and Senior Services responsible for the provision and payment of treatment and care of individuals with tuberculosis committed for public health reasons (after benefits from third-party payers have been exhausted). Prior to this statute change, curators of the University of Missouri had these responsibilities. The University of Missouri Hospital and Clinics operated the inpatient tuberculosis unit at the Missouri Rehabilitation Center, to which TB patients were committed and cared for.</p>	<p>FYI</p>

<p><b>Role of the Board of Health/Board of Senior Services</b>  <i>Margaret Donnelly</i></p>	<p>Questions have been raised lately by Board Members as to what their role as members of the Board of Health and Board of Senior Services really is.</p> <p>Taking into consideration some of the concerns that have been raised, Margaret indicated that one of the roles of the Boards is to advise the Department when we have rules. We do need the advice of the Boards and we value that advice. She also commented that the pace of the rule process has slowed down compared to the pace in the past, for those Board Members who have served for longer periods and remember the process. The rules process gets complicated every year. We work a lot on the rules and some of them are just now about ready to go through General Counsel review and Governor's Office review. Some are very complicated and we want to get it right with our stakeholders.</p> <p>Another area that we have not used the Boards is in working with their key legislators. We need to do a better job of keeping the Board members involved.</p> <p>Margaret also asked the Board members whether they feel we are overloading them with too much information or if they felt there are gaps. She is happy to hear any comments now and if you don't have any today you are welcome to email or call our office any time.</p> <p>Some comments included:</p> <ul style="list-style-type: none"> <li>• I appreciate all of the information. There are times that I get it and don't have time to read it, but I can delete. I would like to keep receiving it. I'm amazed at all that you get done with the limited staff you have and I would be happy to advocate any time you can use me.</li> <li>• I think it would be wonderful if we could speak with legislators and what the ramifications are.</li> </ul>	<p>FYI</p> <p>Call or email Margaret with additional comments/concerns.</p>
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	<ul style="list-style-type: none"> <li>• I find the emails a bit overwhelming in large part because I don't know what I'm supposed to do with some of the information. An example is the employee of the month nominations. I don't think I need to know who the employee of the month is unless I'm supposed to utilize that in some way. If I feel like I'm getting overwhelmed I'm more likely to not screen. For me it's more than I know what to do with.</li> <li>• I have more use for information about old people, not babies, but it may not be possible to parse out who gets what.</li> </ul>	
<p><b>Approval of Minutes from June 22, 2010 Meeting</b> <i>Margaret Donnelly</i></p>	<p>Margaret requested a motion to approve the minutes from the June 22, 2010 meeting.</p>	<p>Joseph Forand made the motion to approve the minutes.</p> <p>Ann Bannes seconded the motion.</p> <p>All in favor.</p> <p>None opposed.</p>
<p><b>Division of Community and Public Health Update</b> <i>Scott Clardy / Bill Whitmar</i></p>	<p>Scott Clardy introduced Bill Whitmar, Director – State Public Health Laboratory, who was going to finish the update that he started at the last meeting. A couple items Bill is covering were very unique happenings to the Laboratory.</p> <p><b><u>Select Agent Inspection</u></b> On June 9<sup>th</sup> and 10<sup>th</sup> the Missouri State Public Health Laboratory (MSPHL) was inspected by laboratory inspectors from CDC's Division of Select Agents and Toxins (DSAT). In order to work with select agents and toxins, a laboratory must register with DSAT to do so. The Select Agent Program regulates:</p> <ul style="list-style-type: none"> <li>• Agents (i.e. Anthrax, Tularemia)</li> <li>• Personnel working with the agents</li> <li>• Laboratories where the agents are stored / worked with</li> <li>• and the overall entity</li> </ul> <p>Federal regulations mandate that Select Agent entities must develop and implement</p>	<p>FYI</p>

	<p>an incident response plan that addresses procedures for theft, loss or release of as select agent, a security plan establishing policies and procedures that ensure the security of areas containing select agents, and a biosafety plan that is specific to the agents being manipulated.</p> <p>Two inspectors spent the two days going over our Security, Incident Response and our Biosafety/Chemical Hygiene Plan. Inspectors noted that they were impressed with our plans and how well they were developed and implemented and commented on how this laboratory was the first they had inspected that had had the each aspect of the Security, Incident Response Plan documented and as many drills completed as this facility had completed. They were also impressed with our facility and the safeguards we have in place to ensure the safety and security of the select agents worked with in our facility.</p> <p>Documentation of all select agent work performed at the MSPHL was scrutinized as well including documentation of all select agents that were received, transferred or destroyed by our facility over the past three years. Select agent access and training records were reviewed. The inspectors noted that the MSPHL was the first facility they have ever inspected that had everyone properly trained as well as having complete records for documenting the training for each approved individual.</p> <p>Four Select Agent Approved staff members were interviewed by the inspectors and did an excellent job. The inspectors were very pleased with their responses and added that our staff was very competent to be working with these agents.</p> <p>We are expecting a written inspection report from the Division of Select Agents and Toxins in about a week and we will have to address any observations within 14 days.</p>	
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	<p>Overall the inspection went very well and we have been assured that our status as a Select Agent Registered entity will be renewed.</p> <p><b><u>HazMat Exercise</u></b>  On May 25<sup>th</sup> the State Public Health Lab (SPHL) conducted a full-scale Hazardous Materials Response Exercise in partnership with several external entities including:</p> <ul style="list-style-type: none"> <li>• Cole County Emergency Response Team (C-CERT) – HazMat Team</li> <li>• Capitol Police</li> <li>• Jefferson City Fire Department</li> <li>• Jefferson City EMS</li> <li>• Hospitals (St. Mary’s &amp; Capital Region Medical Center)</li> <li>• Department of Natural Resources -- Environmental Emergency Response (EER)</li> </ul> <p>The purpose of this exercise was to test our internal response to an accidental release of a biological or chemical hazard within our facility. It also provided an excellent opportunity for the SPHL to collaborate with our external partners to test their response capabilities.</p> <p>Laboratories by nature pose additional hazards due to the type of work that is performed in them. At the SPHL, additional precautions are needed because of the Biosafety Level 3 suite that is located within our facility. Part of the planning process included tours for the external partners, especially JCFD, C-CERT and EMS. It is very important that they understand the type of work we do here, as well as what hazards are present whether they are biological, chemical or even radiological. Hazardous materials demand stringent protocols and procedures and since firefighters are usually first on the scene, we want to make sure they understand the hazards they would be expected to encounter in this facility.</p> <p>A portion of the response exercise included</p>	<p>FYI</p>
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	<p>the use of Level A suits and other personal protective gear to assess the package to determine what the threat was. They also utilized their specialized mass decontamination tents to <u>simulate</u> a mass decontamination of SPHL staff. This was done to allow our staff to witness firsthand the processes used to decontaminate a person exposed to a biological or chemical agent. Most staff members went through a “dry” decontamination process, where they were told what each stage of the decontamination process is as they walk through the tent. Seven staff members participated as “exposed” personnel, and went through the wet decontamination process. Two of these “exposed” staff members were then transported to area hospitals where they underwent another decontamination process prior to being admitted into the emergency room.</p> <p>While this was considered a “drill”, it was taken very seriously by the MSPHL staff and external partners. An after-action report is being prepared to assess the overall performance of the exercise and to identify areas that need to be improved upon. Overall, the exercise was an overwhelming success with all entities praising the hard work and initiative that was put into the planning and execution of the exercise.</p> <p><b><u>New Rabies Policy</u></b>  Due to budget reductions and an increasing number of submissions of specimens for rabies testing, primarily bats, the SPHL and Communicable Disease Program began working together to develop a criteria to ensure that specimens submitted for rabies testing would be those that would be a public health concern or a medical decision would need to be made. A determination was made to utilize the 2008 ACIP guideline for Bat Exposures. This guideline utilizes the “awake and aware” in the presence of a bat model when deciding whether there was a “significant potential exposure” or not.</p>	<p>FYI</p>
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	<p>A policy letter and new virology laboratory form (with new rabies submission section) is in latter stages of development.</p> <p>The SPHL went from receiving 1,500 rabies specimens to over 3,000. Most of those being bats and a large number had no known human exposure. Dr. Howard Pue, State Public Health Veterinarian for DHSS is going out to counties and giving seminars on “Biting Back: How Public Health and Law Enforcement Work Together to Prevent Rabies”. The presentations cover basic concepts of rabies transmission, legal options related to animal quarantine and testing, and how public health and law enforcement work together to help protect citizens from rabies. Public health officials, allied health professionals, law enforcement, animal control personnel, veterinarians, and policymakers are invited.</p> <p><b><u>Anthrax Response Exercise</u></b> Margaret indicated that on August 31<sup>st</sup> herself and staff from the department participated in a regional anthrax exercise known as ARES (Anthrax Response Exercise Series). The exercise was sponsored by FEMA and the Department of Homeland Security. The purpose was to evaluate capabilities associated with the response to biological threats and to improve incident management and public health response to an anthrax incident across all levels of government. The issues identified will advance the level of understanding and serve as a means of improving existing plans while also potentially developing new plans and solutions for future planning and response efforts. Margaret commented that she is constantly impressed with the level of knowledge in this department.</p>	FYI
<b>Questions/Open Discussion</b>	Margaret asked Celesta Hartgraves, Director – Division of Senior and Disability Services, to provide an update on the third party assessment contract.	FYI

	<p>Celesta reported that there was legislation passed during the last legislative session to allow the Division of Senior and Disability Services to contract with an outside agency to conduct assessments for Medicaid funded home and community based services.</p> <p>We did put a contract out in June and are still in the process of evaluating those contracts at this time and hope to start doing the assessments early next year. It will be a statewide contract.</p> <p>The contractor will hire individuals and we have been very specific in the Request for Proposal language that they only hire staff that have the appropriate qualifications. We will be doing oversight and they will be doing the assessment. They have to follow all of our current policies. We will be training them and their staff. We are using the interRAI assessment tool. The individual person is able to select who their provider is and the web based tool will give the client a list of providers to choose from.</p> <p>Margaret commented that this is a huge change for us. We have never done a contract of this scale, but we see it as a good opportunity for us and we are hopeful that we will be able to make this a good change in the organization and the staff of the department.</p>	
<p><b>Adjourn</b></p>	<p>Margaret thanked everyone for taking time out of their busy schedule to be on the call and announced that the next meeting is scheduled for December 7<sup>th</sup>.</p> <p>Margaret requested a motion to adjourn the meeting.</p> <p>Meeting adjourned at 3:02 p.m.</p>	<p>Carol Gosselink motioned to adjourn the meeting.</p> <p>Annette Slack seconded the motion.</p> <p>All in favor.</p> <p>None opposed.</p>

<b>Next Meeting</b>	The next meeting is scheduled for December 7, 2010.	
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Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
                    Chair, Board of Health

Approved: \_\_\_\_\_ Date: \_\_\_\_\_  
                    Chair, Board of Senior Services