

**BAYFIELD COUNTY
BOARD OF HEALTH MEETING
Thursday June 17, 2010, 2:00 p.m.**

Present: Dee Kittleson, Beth Meyers, Wayne Williams, Elaine Kopp, Winefred Punjak, Jim Crandall at 2:35 p.m.

Absent: Grace Heitsch, MD, John Bennett

Staff: Jennifer Jako, Cathy Ekholm, Michelle Dale, Sara Mackewicz

Others: Mark Abeles-Allison, County Administrator; Terri Timmers, Director, Northern Regional Office, Division of Public Health; Terri Kramolis, Health Officer, Ashland County Health Department

1. **Call the Meeting to Order:** The meeting was called to order at 2:01 p.m. by Chairperson Kittleson.
2. **Approval of May 18, 2010 Meeting Minutes:** A motion to approve the minutes of the May 18, 2010 Health Board Meeting was made by Meyers; motion seconded by Kopp. The motion carried unanimously by voice vote.
3. **Possible Action to Move Agenda Items:** None.
4. **Department Structure and Planning Discussion:** The purpose of this is to discuss the direction of the Health Department. Part of the discussion is to determine how department structure affects services. The Board members were given a compilation of answers from the survey done after the May meeting. The survey was to obtain Health Board members and Health Department employees opinions as to what the critical issues the Health Board feels the County should be addressing and what department issues needed to be addressed. They were also given job descriptions for a director/health officer and for just a health officer. A letter from Trempealeau County was received listing the things that should be thought about if we are considering separate departments or combining departments. Terri Timmers handed out a document describing the roles and responsibilities of the Health Officer, the Board of Health and the Health Department. Combining Health and Human Services Departments started in the 70's. At that time, Health Departments and Human Services served many of the same clients. There was an assumption at that time that it would improve services if the departments were combined. Now, Public Health is becoming less individualized and doing more community-based services. Human Services deals with intervention and Public Health works at primary prevention. In the near future Public Health will be asked to work more at things to make people healthy; to be working at the systems level not the individual level. Problems could occur when there is a layer between the Health Officer and the Board, who are the policy-makers. Decisions may be made by the Human Services Director instead of the policy makers. The Health Board has no statutory powers in a combined Health and Human Services Department. The difference between Level 1, Level 2, and Level 3 Health Departments was explained. In the Northern region, there are currently more Level 3 departments than Level 2; and there are no Level 1 departments. There could be some savings by merging. Some of those savings can happen even if departments are not merged such as sharing of financial, clerical and other services. HIPAA would, for the most part, be the same for both. Birth to 3 services could be shared and there would be a backup nurse, although due to the requirements for a public health nurse, it is much easier for a Public Health nurse to fill in for a Human Services nurse than vice-versa. But, it could also be that there would be no savings. Sometime the Health Officer alone makes as much as a Director/Health Officer. And, when departments are combined, the Human Services Director generally gets a raise. There may be more sharing of services with Health staff and Human Services staff within close proximity of each other. Funding Human Service agencies receive from the State is different than the grants Health Departments receive. Health Department grants are performance

based. They must be used for the objectives that were negotiated. If those objectives are not attained, and there is no proof the objectives were attained, the Health Department does not get the money. It was felt the County needed to advertise for a health director whether that person is within Health and Human Services or the Health Department alone. It will make an impact on the job description, pay level and who applies depending on which of these we advertise for. There was concern there might be dilution of programs if the departments were merged. Bayfield County has a stellar reputation for providing services to the residents of the county. Even though Human Services and the Health Department see some of the same clients, they do not deal with the same issues with these clients. There are four counties with combined Health and Human Services Departments in the Northern Region; there are 30 to 40 out of the 72 counties in Wisconsin. The Health Officer does not need to be a nurse but must have at least a BS degree in hard science, such as environmental health or biology, or have a medical degree. If the Health Officer is not a nurse, there needs to be at least one full-time qualified Public Health Nurse. Some members felt the departments did not need to merge but work harder in working together; physically separated does not mean mentally separated and the mental separation has to end. There was also a suggestion to bring this to the Human Service Board and get their feeling on merging departments. Meyers made a motion that the Health Board recommend to the County Board that we maintain the current structure for the Human Services and Health Departments. Motion seconded by Kopp. A voice vote was taken and the motion passed unanimous. The Health Board is still interested in looking at combined and/or shared services between the departments. The job description will need to be finalized. Hopefully we will have someone starting by the middle of September.

5. **Review of 2010 Budget:** The 2010 budget looks good.
6. **Budget Planning for 2011: Priorities, Directions, Department Direction:** The 2011 budget is due August 20, 2010.
7. **Environmental Health**
 - a. **Inspections Report:** No one had any questions about the inspection report. Michelle Dale had nothing to add to the report.
8. **Staffing Updates and Introductions**
 - a. **Summer Intern:** Sara Mackewicz was introduced to the Health Board. She is the summer intern in the Health Department. She is here until the end of July. Sara is helping work on our Community Health Improvement Plan. Right now she is doing some background work and analyzing data.
 - b. **Public Health Educator:** The Public Health Educator has been hired. His name is Peter Morrisette. He will be starting on Wednesday, June 23rd. He will be working two days per week.
 - c. **Public Health Nurse Positions:** Advertising for the full-time Public Health Nurse position ends on June 20th.
 - d. **Environmental Health Sanitarian:** A Sanitarian has been hired. Her name is Ann Marie Coy. She comes to us with lots of experience. Ann Marie will be starting Monday, June 28th.
 - e. **Health Department Director/Health Officer:** Discussed above.
9. **Next Meeting Date:** The next meeting is scheduled for Monday, August 16, 2010, 4:00 p.m. in EOC.
10. **Other Issues:** Missy Nicoletti, our dental hygienist, asked Jennifer to ask the Health Board if they would approve her purchasing some food/ hors d'oeuvres for the dental hygienists that volunteered to help her through the year with her Oral Health program. It would be approximately \$50 and would come out of her oral health revenue. A motion to approve this expenditure was made by Kopp; motion seconded by Kittleson. The motion carried unanimously by voice vote.

Mark, Jennifer and Elizabeth Skulan met with Reba Rice and Dr. Deb Dryer from The Lakes Community Health Center (TLC) to discuss the possibility of TLC having clinic hours in Washburn; specifically in the Health Department. They currently have a facility in Iron River and a dental clinic in Ashland. They are looking at hiring a behavioral professional psychologist to work with patients' psychiatrists to help manage the patients' meds. They are agreeable to working jointly with us. They will be meeting with their board in July and August. In September we should hear if they will be seeing patients in Washburn or not.

11. Adjourn: A motion to adjourn was made by Kopp; motion seconded by Crandall. Motion carried by unanimous voice vote. Meeting adjourned at 3:48 p.m.

Respectfully Submitted,



Cathy Ekholm, Recording Secretary