MINUTES

IOWA STATE BOARD OF HEALTH
NOVEMBER 12, 2008 10:00 A.M.
5TH FLOOR SOUTH CONFERENCE ROOMS #517-518
LUCAS STATE OFFICE BUILDING
321 EAST 12TH STREET, DES MOINES, IA

CALL TO ORDER

Cheryll Jones called the meeting to order.

ROLL CALL

Present:	**Absent:**
Gregory Garvin	Jay Hansen
Cheryll Jones	
Maggie Tinsman	
Edward Maier	
Hattie Middleton	
Justine Morton	
Rahul Parsa	
John Stamler	
Rowe Winecoff	
Heather Adams	

I. Minutes

A motion made by Justine Morton and seconded by Rowe Winecoff to approve the September 10, 2008 Board of Health minutes carried unanimously.

II. Rules

A. Department of Public Health [641] – Barb Nervig

1. Adopted and Filed

a) Chapter 7, "Immunization and Immunization Education: Persons Attending Elementary or Secondary Schools, Licensed Child Care Centers, or Institutions of Higher Education"
These amendments clarify and provide further explanation of portions of this chapter and also update the immunization requirements. The Department received four comments, all related to the parental signature on the provisional certificate of immunization and the rules for explanation of provisional enrollment to the parents. As a result, the requirement for parental signature, as well as the requirement the school notify parents of the provisional enrollment rules ten days prior to the expiration of the certificate, have been removed. These were replaced with a requirement that the provider who signs the provisional certificate assures they have provided education to the parent on the rules regarding provisional enrollment of the student A motion was made by Greg Garvin and seconded by Maggie Tinsman to adopt and file the amendments to Chapter 7. Motion carried unanimously.

b) Chapter 14, "Residential Water Treatment Systems"
These rules describe the requirements for water treatment systems that are advertised or sold in Iowa and for which a claim is made that the system reduces health-related contaminants in drinking water. The rules also include the procedures and fees for the registration of water treatment systems. No comments were received and no changes were made from the noticed version. A motion was made by Justine Morton and seconded by Edward Maier to adopt and file the amendments to Chapter 14 - motion carried unanimously.

c) Chapter 131, "Emergency Medical Services Provider Education/Training/Certification"
These proposed amendments update disciplinary rules for providers and eliminate the fee for retirement of an EMS certification. One comment was received. No changes were made from the noticed version. A motion was made by Maggie Tinsman and seconded by Hattie Middleton to adopt and file the amendments to Chapter 131 - motion carried unanimously.

d) Chapter 132, "Emergency Medical Service—Service Program Authorization"
These amendments clarify definitions for air medical services, describe requirements for driver training and require that service providers notify the Department when employees are terminated for certain reasons. One comment was received. No changes were made from the noticed version. A motion was made by Rahul Parsa and seconded by Edward Maier to adopt and file the amendments to Chapter 132 - motion carried unanimously.

e) Chapter 153, "Smokefree Air"
The purpose of these rules is to implement the Smokefree Air Act as enacted by 2008 Iowa Acts, House File 2212.
Between June 2 and September 30, 2008, 1,085 comments were received by the Department. Although the majority of those comments addressed the law, 120 comments were specifically regarding the Administrative Rules. Changes made to the noticed rules include amending the definitions of "entrance" and "grounds of any public building;" adding a definition of "public building;" changing the required size of vehicle signs from 24 square inches to 9 square inches; eliminating the requirement that a person making a complaint include their name and contact information; changing all references in 153.8(8), to "written notice of violation" to read "written notice of potential violation;" and changing the description of actions taken subsequent to "third and subsequent complaints" to be consistent with description of actions taken subsequent to second complaints.

Bonnie Mapes answered several questions posed by the Board. Bonnie also gave the Board members a packet of material including examples of the complexity of enforcing the smoke-free campus boundaries at Iowa State University, the state Capitol complex, and the city hall in Iowa City. Upon entering a common point of entrance to a smokefree area it must be posted.

Public comments were received and limited to two minutes each. Presenting comments were Beverly Walsmith, representing the Iowa Tobacco Prevention Alliance; Cathy Callaway, representing the American Cancer Society Cancer Action Network and also as a member of the Cancer and Control Commission; Kyle Frette, representing Clean Air for Everyone Iowa Action Network; and Kerry Wise, representing the American Lung Association. All of the comments were in support of the Smokefree Air act.

A motion was made by Justine Morton and seconded by John Stamler to adopt and file the amendments to Chapter 153 - motion carried unanimously.

2. Notice of Intended Action

a) Chapter 142, "Out-Of-Hospital Do-Not-Resuscitate Orders"
The rules in Chapter 142 set forth guidelines for consideration by health care providers and organization to help ensure uniform and orderly understanding, processes and procedures for the use and implementation of Out-Of-Hospital Do Not Resuscitate Orders. This proposed amendment updates information concerning the uniform identifier based on changes to Medic Alert's® pricing structure.

b) Chapter 143, "Automated External Defibrillator Grant Program"
The rules in Chapter 143 describe the automated external defibrillator (AED) grant program which provides funds for eligible organizations seeking to implement an early defibrillator program. These proposed amendments add standards for maintenance of an AED device in accordance with 613.17.2b.

III. Substance Abuse

A. Licensure Recommendations – Cynthia Kelly and Jeff Gronstal

1. Three and Two-Year Comprehensive Programs

A motion made by Justine Morton and seconded by Hattie Middleton to approve a license for a period of three (3) years to Clearview Recovery, Inc., Prairie City, Iowa, license effective October 11, 2008 to October 11, 2011; to Area Substance Abuse Council, Inc., Cedar Rapids, Iowa, license effective May 14, 2008 to May 14, 2011; to Mid-Eastern Council on Chemical Abuse, Iowa City, Iowa, license effective August 20, 2008 to August 20, 2011; and

approve a license for a period of two (2) years to Boone County Community Services, Boone County Recovery Center, Boone, Iowa, license effective November 13, 2008 to November 13, 2010; to ZION Recovery Services, Inc., Atlantic, Iowa, license effective August 11, 2008 to August 11, 2010; to Action Now Chemical Dependency Treatment Services, Crossroads Mental Health Center, Creston, Iowa, license effective October 17, 2008 to October 17, 2010; to Capstone Behavioral Healthcare, Inc., Newton, Iowa, license effective October 26, 2008 to October 26, 2010 carried unanimously with Rowe Winecoff abstaining from the vote on Capstone.

2. 270 Day Programs

A motion made by Rowe Winecoff and seconded by Rahul Parsa to approve a license for a period of 270 days for First Resources Corporation, Ottumwa, Iowa, license effective November 12, 2008 to August 8, 2009 carried unanimously, with Cheryll Jones abstaining.

A motion made by Rahul Parsa and seconded by Edward Maier to approve a license for a period of 270 days for Behavioral Services, LLC, Hazelton, Iowa, license effective November 12, 2008 to August 8, 2009 carried unanimously.

A motion made by Rowe Winecoff and seconded by Maggie Tinsman to approve a license for a period of 270 days for Recovery Center, Berryhill Center for Mental Health, Fort Dodge, Iowa, license effective November 12, 2008 to August 8, 2009 carried unanimously.

3. Denial

A motion made by Rowe Winecoff seconded by Rahul Parsa that the Iowa Board of Health propose to refuse to renew the license of Urban Dreams, S.A.V.E., Des Moines, Iowa in accordance with Iowa Administrative Code 641-155.11(1) carried unanimously with Justine Morton abstaining.

B. Deemed Status Programs

A motion made by Maggie Tinsman seconded by Edward Maier to issue a license through deemed status to Jackson Recovery Centers, Inc, Sioux City, Iowa, based on accreditation survey conducted and accreditation awarded by the Commission on Accreditation of Rehabilitation Facilities (CARF), effective August 31, 2008 to August 31, 2011, and to Broadlawns Medical Center- Chemical Dependency Service, Des Moines, Iowa, based on accreditation survey conducted and accreditation awarded by the Joint Commission, effective July 1, 2007 to July 1, 2010 carried unanimously.

C. New Horizons Recovery Center, Sioux City, Appeal of Administrative Law Judge Decision

Sally Sturges, from New Horizons Recovery Center, and her attorney, Al Sturgeon, joined the meeting by conference call.

Karen Doland stated that Al Sturgeon would have 15 minutes to present an appeal to the board and Heather Adams would also have 15 minutes to respond. Then he would have an additional five minutes to reply to Ms. Adams' argument. Mr. Sturgeon also stated that he saw no benefit in filing a brief in this case.

Sally Sturges addressed the board requesting the board to reverse their decision to suspend New Horizons' license stating that New Horizons provides service to all who ask for assistance regardless of their ability to pay and no one is ever turned away. Many of their clients are repeat offenders, which otherwise would cost the county money and/or break up families. Many of these individuals have been through the recovery process already, have turned their lives around, are gainfully employed, and currently are supporting their families. New Horizons' goal is to provide quality service for persons who are suffering from addiction. Their agency is well respected by those that know them and view them with an open mind. Each client completes a feedback sheet upon going through program. Their feedback always includes their appreciation for the individual service which they received, along with the care, and concern. Their agency does, on occasion, accompany their clients to court if requested and does this without any cost to the client. Ms. Sturges requested that the board look at what they have accomplished within their community without public assistance. She feels that many of her clients would fall through the cracks if not for New Horizons.

Jane Frigge, who is an RN at New Horizons, also addressed the board, stating that she had been with New Horizons for two years, and acknowledged they had problems in the past. However, they are finally getting things right and they need a chance to continue their service. They have helped a lot of people in Siouxland and people hear about their agency by word of mouth. Clients may travel 100 – 150 miles to see them. She believes that their community needs to offer a choice for clients to go for service. There is a larger corporation in Sioux City. She feels that the other organization has a monopoly in this area, and she would like to give people who cannot afford to pay the choice.

Al Sturgeon addressed the board in conclusion thanking the board for the opportunity to be heard on the appeal. He stated that anyone that knows Sally and New Horizons knows that she is an incredible, compassionate counselor and has helped hundreds of people with chemical addictions. She takes great personal interest in their lives and in their addiction. As a counselor she is tremendous, but as an office manager, it's obviously not her strong suit. The budget for New Horizons is incredibly small and in spite of that no one gets turned away. If they were a type of facility that only took individuals with resources they may have the budget to hire an office manager. It would be a shame to close a facility that helps so many people. The letters and testimonials are possibly the strongest messages they could give us for an appeal. And again these are people that everyone else has given up on except Sally and New Horizons. They are hoping that government will have a heart and understand that these programs are a necessary and an important resource to the community.

Heather Adams addressed the board and stated that the Administrative Law Judge (ALJ) had requested that the record be left open at the end of the hearing for the purpose of New Horizon's to be able to fax those letters of recommendation to the Administrative Law Judge. This information was never received by the ALJ so they are not part of the record at this time. Ramona was requested to call Al Sturgeon's office with the department's fax number after the meeting for those to be sent. The department is not disputing that the services they provide to these clients are valuable and important to the lives of these clients. Our position is that it is incumbent upon her to follow the clear rules and regulations of the department; because she herself, more clearly than anyone, understands the value of her work to these individuals and the need to follow the guidelines that are established by the department in the work that she does. It's clear when you review the record as a whole she was provided ample opportunity to follow the department's administrative regulations contained in Chapter 155. She was provided three separate opportunities to correct violations that occurred within her facility. She was given an initial opportunity to submit a plan of corrective action; she did, but it was incomplete. The department again gave her an opportunity to submit a plan of corrective action and again it was incomplete and failed to include a number of the policies and record-keeping requirements. There was another re-inspection that was completed by two other surveyors on site to see if she had met compliance with our standards and she had not; and again failed to achieve a minimum score. Heather urged the board to review the decision by the Administrative Law Judge. She found that the evidence had been clearly established and the board and the department had complied with all the required procedures required to make a decision not to renew New Horizons' one year license. For those reasons, Heather Adams would urge that the board confirm the denial and confirm the proposed decision that is before the board.

Heather stated that in all fairness she would allow Al Sturgeon's office to fax the letters of recommendation to the department for consideration by the board, even thought they were not appropriately and properly made part of the record. Ramona will call Al Sturgeon's office after the meeting with the department's fax number after the meeting for those to be sent. The exhibit as a whole will remain confidential.

At 11:33 AM a motion was made by Rowe Winecoff, seconded by Edward Maier, that the Iowa Board of Health go into closed session pursuant to Iowa Code Section 21.5(1) subsection "a" and "d" for the purpose of reviewing records required to be kept confidential by federal or state law, and to review ongoing investigation to determine whether to initiate disciplinary proceedings. and Iowa Code Section 21.5(f) to discuss the decision to be rendered in a contested case. The motion carried unanimously;

Gregory Garvin made a motion at 11:49 AM to return to open session, which was seconded by Hattie Middleton and carried unanimously.

The board decided to withhold their decision until they have reviewed the letters of recommendation along with Karen Dolan's written notice informing them of the

board's decision. The exhibits need to be held confidential, include releases from the clients to waive confidentiality, or include a confidential certificate on them. The written decision needs to be received by them within four weeks. Ramona will establish a date and time that the board could hold a special session.

IV. Department Reports

A. Director's Information – Thomas Newton

Budget - Director Newton shared that the department was initially asked to submit a status quo budget for FY10. Given the recent revenue projections, it is unclear if the department will be able to keep this or will be asked to submit a revised budget at less than status quo.

Community Visits – Director Newton has been conducting community visits all across the state. Last week he traveled to Waterloo to visit Pathways, a substance abuse and mental health treatment provider. Co-occurring disorders were discussed at this meeting as well as the work of Pathways during this summer's severe weather events. During this visit he also went to the Black Hawk County Health Department and visited with them about the ACHIEVE grant they received from the Centers for Disease Control and Prevention (CDC) in partnership with the YMCA. They are looking at community design and the potential impacts on population health. He also traveled to Anamosa in Jones County, where he met with EMS providers. They are one of four pilot projects in Iowa looking at EMS standards. This initiative is moving parallel to our redesign standards for local public health agencies.

These community visits are an opportunity to speak with local providers and to learn more about what they are doing and note their best practices. The department will capture the best practices discussed at the visits and attempt to connect communities facing similar public health challenges. So far, 12 – 15 community visits were conducted this year. On December 15 he will travel to Poweshiek County to visit their health department. A schedule is being developed to resume the visits at the start of the new year.

Healthcare Reform – The department had a number of responsibilities assigned to it as a result of healthcare reform during this past legislative session. This summer's severe weather delayed the start of much of the work, but things are now moving. Appointments have been made to the advisory councils, and staff has been hired to support them.

• The Governors' Council on Nutrition and Physical Fitness held their first meeting. Staff tells me the council members were excited about their roles in providing policy guidance in the areas of physical fitness, nutrition, and wellness.

• Staff to support the Medical Home and Prevention and Chronic Care Management Advisory Council was hired recently. In addition, these two councils have meetings scheduled in the near future.

• A Health Care Access Advisory Council was also been assigned to the department. A staff person has been hired to support that workgroup which is scheduled to meet within the next two weeks. Their initial focus will be healthcare workforce.

• The Health Information Technology Advisory Council was established to expand statewide the use of electronic medical records. The department has not filled the positions associated with this council. Tom is considering alternate ways of

accomplishing the work outlined in the legislation, including possible release of an RFP.
• A Clinical Advisory Council was established by the legislature for the department with the purpose of providing clinical guidance to many of the health care reform activities. Members include physicians, nurse practitioners, and physician assistants. The Direct Care Workers Advisory Council has been meeting on a regular basis and has made recommendations on certification and education for direct care workers.
• Our final council, the Iowa Choice Council, is being staffed by the Insurance Commissions Office. Director Newton sits on this advisory council. The Iowa Choice Council is exploring how to expand healthcare coverage to all Iowa kids. They have a report due to the legislature December 15.

On another note, Director Newton reported the department is practicing what it preaches. Recently, 102 department staff members signed up for the Des Moines Marathon event - approximately 80 participated. Next year an attempt will be made to expand this to all state government and see if we could get teams from several departments to compete.

B. Staff Reports

1. RSV in Iowa – Ann Garvey

Ann reported that single cases of RSV are not reportable in the state of Iowa. So any communication they have on this issue is somewhat informal. IDPH has no information to support that the RSV season has been more or will be more severe this year.

In response to the board's question regarding Medicaid reimbursement for RSV preventative medications, she spoke with both Medicaid and CDC. Medicaid will reimburse for patients meeting the criteria during the RSV season (in Iowa this is defined as October 30 – March 31). However, CDC has a RSV surveillance program, and the RSV season can be started early or extended if the surveillance shows that greater than 10 percent of tests are positive. Medicaid also indicated that they assess each case individually.

Ann told the board that she would coordinate with Dr. Quinlisk and the Bureau of Immunization to determine whether any additional RSV surveillance or guidance was necessary.

Ann also reported that there have not been any confirmed cases of influenza reported this year in Iowa.

2. Iowa Plan Reprocurement – Kathy Stone

The consultants are still in the process of writing an RFP and have requested to move this to the January agenda. This issue concerns our department working with DHS for personal recovery efforts related to mental health and substance abuse disorders for eligible persons and their families.

3. Licensure Weighting Report Overview –.

Dean Austin and Jeff Gronstal

Dean reported that he visited with Dr. Mary Cesare-Murphy at the Joint Commission and Nancy Bradley of CARF to discuss and compare their accreditation review processes to that of IDPH-Division of Behavioral Health's. The Joint Commission and CARF accreditation processes focus and emphasize ongoing quality and improvement. The CARF initiative is called "Aspire to Excellence" and the Joint Commission is focused on patient/client care related to Immediate Impact-Threat, Less of an Impact, and Minimal Impact on the patient/client. Both have a corrective action process as well as IDPH. Neither has a weighting system that places any more importance on a particular standard, but considers the program/organization as a whole.
They also reviewed with the board how our system was developed by looking at the current and previous licensure weighting reports.

The board decided to keep the current review process. However, if the surveyors notice or identify anything of concern, patterns or continued problems while reviewing an agency, it is to be shared with the board.

4. Review of 2009 IDPH Legislative Bills –

Lynh Patterson and Barb Nervig

Lynh shared with the board that the legislative session starts this year on January 12.

Lynh also shared with the board that our legislative package this year includes four draft bills and are waiting for approval from the Governor's Office:

1) Public Health Modernization Act

Lynh stated that she went through this bill with the board at their last meeting. She wanted to point out that there is a fact sheet on the bill on the department's Web page. Within the overview sheet is a link to the Department's redesign Web page. You should be able to locate the draft bill, summary of the bill, and the fact sheet. This will provide you with a nice overview of the bill, why we are proposing it, and what it will do for public health.

2) Plumbing Board Clean Up Bill

The bill makes mostly technical and some substantive changes to Chapter 105 that governs the Plumbing and Mechanical Systems Board, administered by the Iowa Department of Public Health. These changes are recommended by the board and supported by certain plumbing and mechanical system associations. The board identified these changes during the process of establishing the board and the licensure program.

This would also make allowances for special licenses to be issued (geothermal, heating, water purification systems, and for individuals that lay pipes to the property line).

The board intends to have the licensing process started by January 1, 2009. However, they propose to delay enforcement of the bill until July 1, 2009.

3) Omnibus Bill

This is the department's catch all bill every year. It has three divisions:

• Lead Prevention Program Renovator Training and Certification - Allows the department to set up a program to certify and train any individual that might renovate facilities at high-risk for lead paint.

• Updates to Universal Newborn and Infant Hearing and Screening provisions.

• The last division of the bill provides updates to the department's public health disaster authority. These were identified by the department after the floods this summer.

4) Technical Changes Bill

Barb Nervig provided the board with information on the IDPH Technical Changes Bill and answered questions.

V. Old Business

A. CPR Training for High School Seniors – Tom Newton

Director Newton briefly updated the board that the department has a staff member assisting the Department of Education with the task of writing administrative rules for CPR training. Currently they are looking at the completion of CPR training anytime prior to the completion of the 12th grade. This is not finalized, but when the draft rules are written the department will share them with the board.

B. Epi-Pen Follow-Up – Kirk Schmitt

Kirk Schmidt provided the Board with a report on the use of epi-pens. They were able to identify 12 states that have legislation related to epi-pens in schools. They did find something of interest regarding the language used in the epi-pen legislation. The legislative language was actually provided by the epi-pen manufacturer.

There was a study that was done by the National Association of School Nurses who had some information on anaphylaxis and asthma in the schools. Seventy-two percent reported that nuts were the most common trigger. They polled over 12,000 nurses and less than 500 replied to it. So the information may be a little sketchy. Seventy-two percent of the students had a known history of allergies that were not reported to them. Seventy-five percent of the time there was no ambulance called for an anaphylactic reaction.

They also found a report by the School Health Policies and Program Study. This is a national survey that is done every two years. They looked at the 2006 study. Iowa does have some policies related to epi-pen (administration and medication administration).

They also provided the Board with some school health contacts (IDE, Iowa School Nurses Association and the Iowa Nurses Association).

During their conversation with the Department of Education concerning the upcoming legislative session and last legislative session when they had the

conversation on the epi-pen, they are not pushing this but they have placed this on their watch list.

Kirk reported that during their conversations with the Board of Pharmacy, they felt under the current law there were adequate provisions for a student to provide an epi-pen if there is a known allergic reaction. They can administer their own medication or they can give it to the school nurse with a parental consent form.

After discussion the board agreed to monitor this.

VI. New Business

A. Annual Orientation Refresher – Julie McMahon

This item was postponed until January.

B. Formalize Priorities – Cheryll Jones

Cheryll requested the board to list priorities (possibly limit to 3 - 4) that we want the legislature and the Governor to be aware of that we feel are important issues.

- Redesign/Modernization of state and health departments – we applaud and endorse the departments efforts for modernization
- Prevention
- Protect the public health infrastructure in tough budget times
- Smoking
- Mental health
- Health insurance for children
- Voluntary health insurance
- Wellness and prevention (2008)
- Adequate funding for local public health services (2008)
- Improve coordination and partnership on substance abuse and mental health, with an emphasis on co-occurring disorders (2008)
- Invite Kate Walton from the Governor's Office to attend the January meeting and share the administration's health initiatives.
- State specific bills and specific language (Heather Adams stated that this will not be available when we draft the letter)
- Specific as we can without including bill numbers
- Environmental Health - develop a "green" policy (air & water) in Iowa.
- Mental health – the effects on survivors of disasters
- Wildlife protection
- Disaster preparedness – look at the lessons learned

Discussion was held and Heather clarified the Board's role. It is to advise and counsel the Department. We do not necessarily have to be completely in alignment with the department. She also advised the Board that members can lobby individually but not representative of the BOH. The Board can take positions on specific ideas and issues. The Board has also, in the past, taken a

specific position on a bill through Lynh Patterson. Our channel for lobbying is through the department's legislative liaison.

The Board requested that Ramona provide this list of priorities to the Board so they can decide in January what our priorities are.

C. November 2009 BOH Meeting Date – Cheryll Jones

1. November 4 or November 18

The board decided to move November's meeting to November 18, 2009 to avoid holding the meeting on Veterans Day in 2009.

VII. Next Meeting

A. Items for January 14, 2009 Agenda

1. Iowa Plan Reprocurement – Kathy Stone
2. Annual Orientation Refresher – Julie McMahon

VII. Adjournment

At 2:16 PM a motion was made by Rahul Parsa, seconded by John Stamler, to adjourn the meeting - motion carried unanimously.

Thomas Newton, Director
Secretary of the Board
Iowa Department of Public Health

Ramona Cooper
Recording Secretary
Iowa Department of Public Health