Memo on Agenda Items

Thursday, June 22, 2023

11:44 AM

MEMO on AGENDA ITEMS

Montgomery County Board of Commissioners Meeting June 26, 2023

Consent Agenda

Approval of Claims and Payroll Dockets

New Business

Recognition of Highway Department Employees

Amber Herron and Cale Stephens of the County Highway Department have obtained the title of Road Builder through Purdue LTAP.

The Road Scholar Program was designed to serve as a core knowledge base for those actively involved with Indiana's local roads. This program provides attendees with foundational information about road care and allows opportunities for networking with peers and industry leaders. Participants have to complete 12 core courses, educational conferences and workshops to accrue credit hours. Once the 12 courses are complete and 300 credit hours have been obtained, participants are awarded the title of Road Builder.

Service Gap Analysis of Core Public Health Services

The Indiana General Assembly has approved additional funding for local health departments to provide core public health services. Counties may opt in to receive the additional funding.

For Montgomery County, the funding levels for 2024 would range from a minimum of \$412,554 and a maximum of \$550,072. In 2025, it would range from \$852,108 to \$1,100,144.

The local match for 2024 would be the average of county tax levy-related funds distributed to the Health Department in the preceding three years (2021, 2022, 2023). The local match for 2025 would range from \$184,938 to \$246,584. The 2023 budget for the Health Department in the property tax supported fund is \$419,129 and the total budget including state funding and grants is \$652,760.

As part of the requirement to receive additional funding, the Health Department has completed a gap analysis of the core public health services. The gap analysis identified the services that are currently being offered and those services that are not being offered or have been identified as needing to be expanded.

Resolution

Resolution Accepting State Public Health Funding

If the County wishes to receive the additional funding from the State for core public health services, the Board of Commissioners are required to adopt a Resolution to accept the state funds.

Agenda

Thursday, June 22, 2023

11:44 AM

AGENDA

Montgomery County Board of Commissioners Meeting June 26, 2023

8 am

Montgomery County Government Center 1580 Constitution Row Crawfordsville, IN 47933

Call to Order: Board President John Frey

Pledge of Allegiance

Prayer

Consent Agenda

Approval of Claims and Payroll Dockets

Old Business

New Business

Recognition of Highway Department Employees Service Gap Analysis of Core Public Health Services

Resolution

Resolution Accepting State Public Health Funding

Other Business Adjournment

Agenda subject to change

Next Regular Meeting: July 10 @ 8 am

Montgomery County acknowledges its responsibility to comply with the Americans with Disabilities Act of 1990. In order to assist individuals with disabilities who require special services (i.e. sign interpretive services, alternative audio/visual devices, and amanuenses) for participation in or access to County sponsored public programs, services, and/or meetings, the County requests that individuals makes requests for these services forty-eight (48) hours ahead of the scheduled program, service, and/or meeting. To make arrangements, contact ADA/Title VI Coordinator Lori Dossett @ 765-361-2623.

Recognizing Highway Department Employees

Thursday, June 22, 2023 11:44 AM

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Local Public Health Funding Details

Thursday, June 22, 2023

1:44 PM

Local Public Health Funding 2024 and 2025



Montgomery County Funding Information

Counties that opt-in will receive enhanced funding. Funding will be distributed on a sliding scale dependent upon how many counties opt-in. The minimum and maximum funding amounts available to your county are listed below.

OPT IN

2024: Minimum: **\$412,554** Maximum: **\$550,072**

County Match: Average of county tax levy-related funds distributed to the LHD in the preceding three years (2021, 2022, 2023). Will be provided in the near future.

2025: Minimum: \$825,108 Maximum: \$1,100,144

County Match Minimum: \$184,938 County Match Maximum: \$246,584

- OR -

OPT OUT

Legacy amount from Local Health Maintenance fund/Trust: \$54,767.70

Funding Requirements



Communicable disease prevention and control



Vital statistics



Tobacco prevention and cessation





Fatality review (child, suicide, overdose)



Maternal and child health









Referrals to clinical care (IC-18-2-79.5 (22))





Childhood lead screening and case management





At least 50% of funding must be spent on these core services



Food protection



Pest/vector control and abatement



Public/semipublic pool inspection and testing



Residential onsite sewage system permitting and inspections



Orders for decontamination of property used to illegally manufacture controlled substance



Sanitary inspection and surveys of public buildings



Sanitary operation of tattoo parlors and body piercing facilities



Sanitary operation of facilities where eyelash extensions are performed No more than 40% of funding may be spent on these core services

Other Funding Information

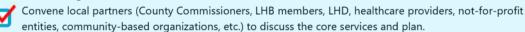
- · Counties may opt-in or opt-out in any fiscal year.
- Counties (and cities with a municipal health department) must set up new standardized non-reverting "local public health services fund" to receive these new state dollars. The 60/40 requirements only apply to state funds, not the county match. The county match/share may consist of funds attributable to taxes and miscellaneous revenue, but it may not include fees collected by the local health department, federal funds or private funds.
- Counties may issue grants to and enter into contracts with local partners to provide core public health services.
- Before a LHD may hire a new position or contract with a third party to provide core services, they must post the
 position or contract publicly for 30 days (applies to opt-in counties only).
- Capital expenses paid for with state funds are capped at 10% each year. These include:
 - Purchase, construction, or renovation of building or other structures
 - Land acquisition
 - o Purchase of vehicles and other transportation equipment
- Any funding the LHD received under the prior funding mechanism stays with the county. We are working with the State Board of Accounts on guidance regarding the use of any carryover funds going forward.
- IDOH has contracted with CDC Foundation for a 5-person team to provide technical assistance to LHDs upon request through August 2023 Link for our CDC Foundation IDOH Assistance Request form: https://app.smartsheet.com/b/form/e788f5ae84964248bb7487f17b021f0f

Technical assistance available:

- o General budget support and how to use templates
- Core public health service delivery
- Brainstorming innovative solutions and sharing best practices
- Connecting LHDs with community-based organizations
- Support on KPI reporting and evaluating impact
- o Information and support for LHDs to complete community health assessments
- Office hours for IDOH subject matter experts for the core services have been scheduled. Click to select a date and time:
 - Lead
 - Immunizations
 - Tobacco
 - Nutrition & Physical Activity
 - Food Protection

- School Health
- Environmental Public Health
- Epidemiology
- Vital Records (May 16 webinar)
- Maternal Child Health & Fatality Review

Next steps:



budgeted for capital projects.

Establish a county health plan and budget (financial report) for the new state funds and only delivery of core public health services. Make sure the plan meets the 60/40 guidance and no more than 10% of the funds are



County Commissioners vote to opt-in to new funding by Sept. 1, 2023.

Submit financial report (budget plan) to IDOH and State Budget Committee by Sept. 1, 2023.

Gap Analysis for Health Services

Thursday, June 22, 2023



Montgomery County Health Department

1580 Constitution Row Ste. G Crawfordsville, IN 47933

Service Gap Analysis
of
Core Public Health Services
Health First Indiana

At least 60% of the proposed State funding for the Health Department must be spent for these preventive core services:

Red Text: Programs not currently provided by the Health Department or programs that will need to be expanded. Green Text: Programs currently provides by the Health Department.

Tobacco Prevention and Cessation

- We do not at this time; this is one of the programs that we will be implementing and expanding with the GPHC funds. Education materials, alternatives to smoking, support and resources.
- LHDs should work with partners to develop or join an existing tobacco control coalition. - We do this with Drug Free Montgomery County.

Chronic Disease Prevention

MCHD should engage in services that will prevent and reduce chronic diseases
such as obesity, diabetes, cardiovascular disease (including hypertension and
hyperlipidemia), hepatitis C, and cancer. We do not at this time. This is one of
the programs that we will be implementing and expanding on with the GPHC
funds. We are also going to be working with our community partners in
offering these services. Education, recourses, access to care, etc.

Trauma and Injury Prevention

- MCHD should engage community and/or regional partners in the coordination
 of harm reduction for substance use, such as naloxone distribution, and peer
 recovery and rehabilitation services, and/or trauma and injury prevention
 initiatives. We already do part of this, but this is a program that MCHD will
 be expanding on with our community partners. This is a program that will
 continue to grow.
- We already provide educational materials. This is a program that MCHD will be expanding in regards to qualifications for the diaper pantry.

Fatality Review

- MCHD shall participate on local Fatality Review Teams, including Child Fatality Review, Fetal-Infant Mortality Review, and Suicide-Overdose Fatality Review as required in statute to include:
 - providing local Fatality Review Teams with vital records necessary to review deaths, including birth, stillbirth, and death certificates,
 - Working with local Fatality Review Teams to ensure annual reports are submitted to IDOH.
 - Working with community partners to ensure that fatality prevention initiatives are implemented in the local community, and
 - Developing equity-focused fatality prevention strategies to address disparities in maternal and infant mortality. We are actively participating on the teams and providing the required records, along with initiatives and prevention strategies.

Maternal and Child Health

- MCHD should provide or ensure direct or warm referrals/linkage to care and
 resources as warranted to family planning, prenatal care, WIC services, home
 visiting services, substance use treatment, or services to assist clients in
 applying for Medicaid and presumptive eligibility. We do not at this time. This
 is a program we will be working on implementing in our department, and
 supporting our community partners.
- MCHD should provide health promotion and materials to support safe sleep, breastfeeding, healthy eating and physical activity, and clinical referrals as needed. This is a program that MCHD will be expanding and meeting with community partners on to discuss further support in growing these services.
- MCHD should develop equity-focused strategies to improve infant and maternal health outcomes. This is a program that we are working on improving in our department and with community partners. Education, resources, access to care, etc.

School Health Liaison

- MCHD shall have a school health liaison, with schedule to be based on community need, whose focus is schools and serves as a local resource for all K-12 schools within the county and local public resource for all schools. Activities could include:
 - Partnering to implement school wellness policies, including a comprehensive strategy to address substance use in schools,
 - Partnering with schools to promote whole child health, including physical, mental and student health and wellbeing,

- hearing and oral health,
- Collaborating and enhancing of current vaccination efforts to ensure childhood vaccine requirements and seasonal vaccine needs are addressed,
- Developing and collaborating with school and community partners to help support school needs, and
- Supporting schools with evidence-based education on nutrition and physical activity

We have a school liaison that works with the schools; but this program requires continuous education and growth as the needs continue to grow in the schools.

Lead Case Management and Risk Assessment

- MCHD shall ensure there is an IDOH-trained lead case manager on staff, or one
 available to their jurisdiction, to conduct case management within timeframes
 outlined in 410 IAC 29. This is a training and program we will be offering with
 the funding from GPHC.
- MCHD shall ensure there is a licensed Lead Risk Assessor on staff, or available to their jurisdiction, to conduct assessments within timeframes outlined in 410 IAC 29. We will be training an employee to conduct these assessments.
- MCHD should ensure no-cost lead testing for children under 7 years is available within their jurisdiction.

This is a project/service that we will be implementing. This program will require trainings, education materials, and health care management for families.

Access to and Linkage to Clinical Care

- MCHD shall employ at least one full-time public health nurse with expertise to:
 - provide clinical services, such as those related to communicable diseases, lead case management, and immunizations, and
 - refer residents to clinical resources, such as those related to substance use disorder, health screenings, and prenatal care.
- MCHD should maintain an assigned staff member to address after hour's calls for public health emergencies, such as urgent communicable disease cases.

We do this, but this is a program that we will be expanding on in regards to education, need assessments, providing resources, and working with community partners to ensure patient needs are being met. We already have staff members that take after hour phone calls for public health emergencies, and respond when needed.

Tuber curous (TD) Trevention and Case Management

- MCHD should provide or ensure case management for those with suspected or confirmed TB disease, including investigation and specimen collection, enforcing isolation, providing directly observed therapy, and coordinating clinical and social needs.
- MCHD should conduct investigations for those diagnosed with infectious TB disease, including contact identification, education, testing, and treatment (as needed).
- MCHD should coordinate clinical follow-up for those designated with a Class B immigration status and provide or ensure case management and directly observed therapy for TB if needed.
- MCHD should work with IDOH to identify and treat latent TB infection (LTBI) according to the IDOH TB Elimination Plan.
- MCHD should be aware of the socioeconomic, environmental, and behavioral
 factors that place individuals in their communities at risk, such as
 housing/crowding, sexual behaviors, and underrepresented/underserved
 individuals.

Expanding this program to include blood testing for TB individuals that come back with a positive test, educational materials, case management, resources, and support.

Health-Related Areas during Emergencies/Disasters

- MCHD shall maintain at least a 0.5 FTE dedicated preparedness coordinator
 who actively participates in their district Healthcare Coalition and engages in
 county-level emergency planning, including outbreak and environmental health
 responses, to link public health and public safety.
- MCHD should actively participate in online resource tracking for emergency response.
- MCHD should act as lead for Emergency Support Function (ESF)-8 for their jurisdiction during emergency and disasters.
- MCHD should be the primary safety net to ensure equitable, accessible vaccines
 and other medical countermeasures as needed in an emergency.

This is a program that we participate in, but requires continuous education and trainings.

Immunizations

- MCHD should offer vaccines to all individuals, including vaccines that are
 publicly and privately funded, so that anyone has access to vaccines through
 a local health department.
- MCHD should ensure that vaccination clinics are available to meet the
 vaccination needs of their jurisdiction and ensure there is flexibility to meet the
 unique needs of all residents.

their stated vaccination goals.

Due to COVID-19, studies show that across the nation children are severely behind on required immunizations. The MCHD Public Health Nurse and School Liaison will work with the schools in providing easy access to these immunizations and education on immunizations.

Infectious Disease Surveillance and Prevention

- MCHD should review all laboratory reports and infectious disease reports that are reported to their jurisdiction.
- MCHD should initiate an investigation, obtain clinical information, facilitate collecting and shipping
 specimens, identify outbreaks, and assess ongoing transmission risk for immediately reportable conditions
 and non-immediately reportable conditions within timeframes specified in the IDOH published list of
 reportable diseases and control measures.
- MCHD should lead the response of identified outbreaks and clusters in their jurisdictions and implement control measures to contain, mitigate, or end ongoing transmission of communicable diseases.
- MCHD should be aware of the socioeconomic, environmental, and behavioral factors that place individuals in their communities at risk.
- MCHD should provide testing and counseling for HIV, hepatitis C, and other sexually transmitted infections.

This a program that will be expanded in our department. This program requires continuous trainings for the nurse, educating the community, case management, and investigations.

Vital Records

- MCHD shall have an IDOH-trained registrar(s) in vital records rules, policies, procedures, and system use from IDOH and able to provide timely birth, death, and fetal death certificates in accordance with state statute. We offer these services.
- •MCHD should use or work to onboard the IDOH DRIVE system to issue birth, death, stillbirth, and fetal death certificates.
- •MCHD shall follow state policies and procedures to make any changes to vital documents in accordance with state statute.

Our department already does this, but the State is expanding on this, so we will be required to do so also.

Up to 40% of the proposed funding can be spent for these core services:

Food Protection

- MCHD should ensure sufficient, designated staff are available to conduct necessary inspections on all retail food establishments timely and professionally, such as new facility plan reviews, routine inspections, follow-up inspections, and foodborne illness complaints.
- MCHD Food Inspectors should be proficient in risk-based inspection, centered on training provided by IDOH and access to continuing education on risk-based inspection.

We provide this service, but our Environmental Health Specialist (Food Inspector) also does pools, tattoo parlors, and "unfit homes". In able for the MCHD to sufficiently do necessary inspections, this is where the Environmental case manager would take over the homes.

Environmental Public Health

- MCHD shall investigate housing/nuisance/sewage complaints in a time frame reflecting the urgency of the complaint and in accordance with 410 IAC 6. We provide this service, but these investigations do take an extreme amount of time in education, remediation, and several home visits.
- •MCHD shall conduct plan review, issue construction permits, and conduct inspections of onsite sewage systems within the timeframes listed in state statute. We provide this service.
- MCHD shall engage in the inspection and survey of public buildings under IC 16-20-1-22.
- MCHD shall issue orders for decontamination of property used to illegally manufacture a controlled substance under IC 16-19-3.1 and IC 16-41-25. We provide this service.
- MCHD shall be engaged in pest and vector control and should be engaged in routine mosquito surveillance through standardized trapping and testing procedures. We provide this service.
- MCHD shall conduct routine inspections and monitor testing results of public and semi-public swimming
 pools and promptly provide an inspection report outlining any deficiencies to the facility as outlined in 410
 IAC 6. We provide this service.
- MCHD should provide outreach and guidance for safe private well water quality and other environmental health matters to furnish recommended testing parameters and best practices. We provide this service along with a State Certified testing lab where we test samples for bacteria, and E.coli.

Tattoo, Body Piercing, Eyelash Safety and Sanitation

- MCHD should respond to sanitary complaints at establishments applying tattoos, body piercings, and eyelash extensions and provide recommendations to improve sanitary conditions to protect the public. We provide this service.
- MCHD shall have the capability to enforce the Indiana tattoo and body piercing rule and eyelash extension rule. We somewhat provide this service, but will be expanding on it.

Here is a summary of what our internal and community gaps analysis showed:

- There is a need for a second full time **Public Health Nurse**:
 - Education on vaccinations
 - Expansion of our vaccination services to schools, occasional evenings, and occasional weekends
 - o Traveling to the schools and doing immunization clinics as needed.
 - o Expansion of lead tests-MCHD will be offering lead testing on children due to the State changing the levels of lead in children, there is an increase in lead cases.
 - o Expansion of investigations on communicable diseases
 - o Expansion of infectious disease surveillance and prevention
 - o Expansion of our STI testing to include HIV and Hep C, and other STI's.
 - o Education to the community in all areas.
- There is a need for an Environmental Case Manager
 - o Lead levels are to be investigated if a lead level in a child is 5 or greater.
 - Lead risk manager will be going into the homes to do lead testing of inside of the home, education with the parents; this will require continuous home visits.
 - There is an increase in "Unfit for Human Habitation Homes" due to mental illness, substance
 use, generational trauma, and generational lack of education. Deeming a home "Unfit"
 requires education to families, continuous follow-ups with the homes, and connections to
 services.
- There is a need for a huge need for a **translator** to bridge the language barrier.
- The national average of cost of living has gone up 6% with a national average of inflation at 10%, 7% of the inflation is in regards to food. To remain competitive as an employer, and to retain the employees, there does need to be an increase in salaries. I have lost five plus employees, since September, and while there have been various reasons to them leaving, the top explanation has been the pay and the future pay.
- We are also in the process of meeting with community partners that provide health core services to see how we can support their growth as a department for our community.

Resolution Accepting State Public Health Funding

Thursday, June 22, 2023

11:45 AM

RESOLUTION 2023-A RESOLUTION OF THE MONTGOMERY COUNTY BOARD OF COMMISSIONERS ACCEPTING STATE PUBLIC HEALTH FUNDING

WHEREAS the Montgomery County Board of Commissioners is the county executive body and authorized by law to adopt ordinances and resolutions for the administration of Montgomery County Government;

WHEREAS the Indiana Legislature has passed Senate Enrolled Act 4-2023 and House Enrolled Act 1001-2023, to ensure every Hoosier has access to the core public health services that allow them to achieve their optimal health and well-being;

WHEREAS the Montgomery County Board of Commissioners recognizes the importance of public health to support a healthier community and create a better quality of life for its residents.:

NOW, THEREFORE, BE IT RESOLVED by the Montgomery County Board of Commissioners as follows:

- 1. The Montgomery County Board of Commissioners supports initiatives that sustain and maintain core public health services at the county level with local input and flexibility to meet the needs of the community.
- 3. The Montgomery County Board of Commissioners commits to the County's right to self-direct and acknowledges that by opting-in and accepting these funds it retains authority and control of the county health department otherwise afforded to it under state law or code pursuant to Indiana Code 16-20-1-12(i).

RESOLVED this 26th day of June, 2023.

MONTGOMERY COUNTY BOARD OF CO	OMMISSIONERS
John Frey, President	
James D. Fulwider, Vice President	
Dan Guard, Member	
Attest:	