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**BOARD OF HEALTH MEETING MINUTES**  
**April 30, 2024**  
**6PM**

The Scotland County Board of Health met on Tuesday, April 30, 2024 at 6:00 p.m. at the Emergency Operations Center and the following Board members were in attendance: Amanda Deaver, Diann Beane, Dr. Freda Singletary, Charles Todd, Ian Yancey, Stephanie Littles, BJ Gibson, Sarah Johnston. Board members absent were Betty Gholston, Dr. Herald Hughes and Nicole Monroe. Staff present were: Christine Russell, Tim Martin, [Kathie Cox](#), [Sharon Alford-Leach](#), [Donna Page](#), Joy Hawkins and Carlotta Rivers.

**Call Meeting to Order**

Dr. Singletary, Chair, called the meeting to order at 6:05 pm. Invocation was led by Commissioner B.J. Gibson.

**Discussion**

There was no discussion about the current agenda.

**Adoption of Agenda**

Commissioner Gibson made a motion to adopt the agenda. Stephanie Littles seconded that motion.

**Approval of the February 20, 2024 Minutes**

Diann Beane made a motion to approve the minutes. Commissioner Gibson seconded the motion.

**Public Comment**

There was no public comment.

**Administrative Reports:**

**Fiscal Update, Fee Schedule and Preliminary Budget**

- Tim discussed the financial update as of March 31st, 2024. Tim stated that we are through three quarters of the fiscal year so that means we should be at 75% and the total for the health department is at 65.8%. So we are, as far as expenditures, currently about 10% under budget.
- The immunizations, as Tim stated the last time we met, would come down as soon as he was able to pull the money from the revenues that we got extra plus additional cost of private immunizations that are raised every quarter. We have also bought a lot of rabies vaccines this year.
- Revenues, once again, are at 75% and we should currently be at 65.4% so we're about 10% under budget as far as collections.
- Dr. Singletary asked if our billing was still behind. Tim responded that what we are billing for today was done yesterday so there is no longer a lag in billing.
- Tim presented to the board the General Statutes which details the powers and privileges of the local board of health.

- Accreditation Benchmark 33.5 and 39.3 is our accreditation that says that we have to have a policy in place and the Board of Health has to approve them.
- Tim gave out the fee schedule to the board and went over the only change which was the vaccines.
- Once this fee schedule is approved by the board it will go to Beth Hobbs and April Snead then it will be sent to the Commissioners and the Commissioners will approve this as part of their budget and their fee schedule.
- Tim went over the Environmental Health fee schedule with the board members.
- Tim explained, Valentina compared our fees to surrounding counties and noticed that our fees were significantly lower than other counties.
- Commissioner Gibson stated that he noticed that these fees are doubling and stated that he would much rather we raise these fees but not double it immediately and do a gradual increase.
- Dr. Johnston asked Tim for the reasoning as to why we are raising these fees. Tim responded that technically we have not raised fees since 2007 and a state consultant came and talked to Valentina and asked questions and then realized that we were lower than most people in the state but it's up to the board to accept these new fees as the change in fees is a recommendation only. He also stated that the board is more than welcome to review the schedule in further detail.
- Diann Beane asked Tim how long it takes to evaluate these changes. Tim replied that he was told that the time varies due to a lot of times they will go out to meet someone and they will not be there (i.e. issuing permits). Commissioner Gibson suggested having Valentina present to discuss these new fee changes so she can further elaborate as to why they are changing. Dr. Singletary stated that these fees are possibly raised due to the current inflation. Dr. Singletary stated that for the citizens in the community, we want to make sure we're utilizing the information that we have and we know to make the decisions. Tim stated that he would do an internal audit and pick random places to see their costs and compare.
- Tim stated that per our policies, the Environmental Health fees need to be reviewed annually.
- Tim also noted that we did not previously charge a re-visit fee but we are suggesting that fee be applied now.
- Diann Beane asked Tim if the existing wells where you're taking samples are sent to a lab, if the person who owns the well pays for the testing and we just collect it or how does that work? Tim responded that we are collecting the information and we're sending it to the state lab for it to be sent off to be tested.
- Mr. Todd asked Tim if there is any percent across the board instead of just doubling things that should be fair. Tim responded that there is no policy from the state for anything percentage wise.
- Tim stated he spoke with someone else who had previously had experience with changing these fees so some of our fees that we currently have are percentage based with the cost plus 5%. The immunizations of the cost round to the nearest dollar plus 5%. To achieve that cost, Tim asked the board members to let him know how they feel other than doing the internal audit. If that internal audit comes up to be a percentage, then percentages are usually easier, however, usually most of the time in Tim's position with fees for clinical, they don't like percentages.
- Dr. Johnston asked Tim if the fee for tattoo artists was for the inspections. Tim responded that we are charging \$300 for inspections per tattoo artist.
- Commissioner Gibson made a motion to approve the new FY25 fee schedule. Stephanie seconded the motion. (This motion is excluding the changes in the Environmental Health fees).
- Tim discussed the preliminary budget. He stated that there are ten essential Public Health things that we do and anytime any financial decision is made, we have to make sure we have these ten essential services in mind when we do so as that is also part of accreditation.
- Tim mentioned that we sent our budget into the county and they came back and asked us to cut 10% and we did. So we have cut our budget 10%. Tim stated that he wanted to let everybody know that in

that 10%, a lot of that was training and travel so that means people who go to conferences that were not required for CEU's, not required for CCE CEU's, or not required for agreement addendums, that some of that training was cut out.

- Tim stated that the projected salary and fringe is \$3,590,590,000 and operating expenses with the 10% cut is \$84,000 so the total expenditure of the health department was \$4,674,008. The grant revenue (which is the money we get in from our AAS) and our grants is \$1,377,581, the generated revenue by the clinic is \$93,960 and environmental health revenue is \$40,000. So the total revenues is \$2,348,000, so that means the difference between the revenues and the expenses is what the county puts into the health department. The health department is 50% funded by the county and that funding from the county makes up nine cents on the county's tax rate.
- Dr. Johnston asked the board, "What is our county tax rate?" Commissioner Gibson responded it is .99 cents.
- Tim explained to the board that he would like to present more information on Medicaid at the next meeting and can set up a zoom meeting with Steven Garner to discuss how this process works with Dr. Singletary and County Commissioners.
- Mr. Yancey asked Tim if he considered cutting the 10% from any other activities. Tim responded that we have cut out several other items that we have at our outreach events as far as stress balls, promotional items, pens, cups, etc. Amanda stated that office supplies was an area that had to be cut as well as uniform cost.
- Commissioner Gibson stated that Commissioners are in a position where they are trying to balance their budget with some of the changes that were made. He stated they did a salary study that brought a lot of changes in salaries. There were a lot of things that we did because we had ARPA funds. Those funds are gone and so one of the areas that they are trying to maintain is to get away without doing a lot of vehicle purchases this year so that they can catch up and fall back in line next year.
- Dr. Johnston asked Tim how often our Animal Control vehicles are being used and if we can condense them down to one or two vehicles. Amanda responded that these vehicles are used very frequently. Amanda stated that we definitely need two trucks to operate as busy as Animal Control is. Dr. Johnston asked if it was possible to use another truck for Animal Control and Tim stated that it depends on if the dog boxes would fit on the truck because all truck beds are different and may not fit.
- Tim clarified that there is only one additional financial report needed for accreditation purposes, not two more reports as he said in the last meeting.

### **Clinical Updates**

- Donna described to the board the purposes of the H.E.A.R.T. team which includes having fundraisers to help HIV patients.
- Donna stated that programs as such are beneficial to the county as well as helping us keep our federal AA's.
- Donna also described the EPI team and the usefulness of the team. She stated that basically if we should have a major outbreak such as salmonella at one of our restaurants, the team comes together as a group to discuss how to resolve the issue at hand.
- Dr. Singletary stated that public health has never been a place where you walk in and you understand what it is so the board asks detailed questions because these are things they need to know and they want to have presented in the meeting to understand more than just a number.
- Dr. Johnston asked Donna about the Child Fatality Prevention Team and asked why we spent \$17,000 on this team. Donna explained it is a program required by the state that has meetings to discuss why the children of our county have died and ways to prevent future deaths of the children of our county.
- Dr. Singletary stated that the board wants to know what resources staff members are bringing back to the county from their training that will help our citizens.

- Diann Beane commended SCHD on a job well done during the COVID pandemic and encouraged everyone to keep pushing through.

### **Health Director's Report**

Amanda discussed the Strategic Plan Goal 1: Invest in community led solutions to advance health equity:

- Amanda stated that the Mobile unit is currently being scheduled for outreach events. The mobile unit will be used to provide immunizations, Labs to Go, WIC services and educational events in the areas of the county where transportation may be a barrier. We recently found out that it is possible to complete STI screens with the Mobile unit by using urine tests and self swabs. Currently the Mobile Unit is scheduled for The Spring into Summer Health Department Health Fair on April 27th, Gibson 125 year Celebration on May 18th, and Community Day at IE Johnson on June 5th. There is also a possible event at Sycamore Lane Primary School Kindergarten orientation to do immunizations.
- Amanda mentioned that the Postpartum Home visiting program that kicked off in February is going strong. Twenty Five (25) postpartum mothers and infants were visited by the postpartum nurse who provided early and preventive services and anticipatory guidance. This service delivers educational services and health and social support directly to families in their home. The goal of this program is to reduce infant mortality and promote healthy babies.
- Amanda stated we have been awarded a Women's Health Grant that will start in July 2024. The grant is for \$150,000 per year for the next three years. This grant will increase access to contraceptives by offering family planning services within the community with satellite clinics. This will assist with the transportation barrier that many of our citizens experience. Beginning in August, we will hold a satellite clinic at St. Andrews every Wednesday. We hope to expand to other areas of the county as more people learn of this opportunity.
- Commissioner Gibson asked Amanda what the \$150,000 grant would allow us to purchase. Amanda responded that it can be spent on the actual contraceptives, hiring community health workers, as well as family planning services. Amanda stated that this grant could also assist [Joy Hawkins](#) with helping patients apply for Medicaid.
- Dr. Singletary asked Amanda if this grant could help with STD testing and Amanda responded that it could definitely be used in our Family Planning Clinic. Amanda also stated this grant will provide the agency with two community health workers.
- Dr. Johnston asked Amanda to define "family planning" so Amanda explained that it is to prevent unplanned births or when to have children.
- Amanda stated that Janna Blue is currently providing a class at St. Andrews called "Making Better Choices" to go along with the family planning.

Amanda discussed the Strategic Plan Goal 2: Promote healthy behaviors to enhance an individual's health and wellness:

- Amanda stated we currently are holding Family night on the first Monday of every month. This event is growing and at the April Family Night, we had 36 registered participants. Each month a different parenting skill is introduced. Education, games and dinner are provided.
- Milk Mondays are going well. Every Monday, breastfeeding support is offered in the Health Education Room. At least ten breastfeeding women participate each week.
- According to our most recent Community Health Assessment, Diabetes is the third leading cause of death in Scotland County. We are initiating a Diabetes Education Program at the Health Department.

The program has been promoted and we have received letters of support from local physicians. We are in the last stage of being accredited through the Diabetes Association so that we can bill for this service. We plan to roll out the pilot in mid May.

Amanda discussed Strategic Plan Goal 3: Ensure public health is prepared for emergency response in a disaster or communicable disease outbreak:

- According to NC General Statute, the Health Department is responsible for rabies control in the county. We continue to have issues with the Humane Society having available kennels for our Animal Control officers to bring in strays. A meeting took place on March 11th with the Health Director, County Manager, City Manager and Shelter Manager to discuss the issue. We are still being told by the shelter that they continue to be at max capacity and can only receive aggressive animals. We collaborated with the Humane Society and held a rabies clinic on March 16th. The clinic was a success and 50 pets received a free rabies vaccination. We have also coordinated with our local animal hospitals and rabies vaccination was available through April 30th at a reduced cost of \$13.00.
- Dr. Singletary asked Amanda about the process of picking up stray/aggressive animals. Amanda responded that due to the lack of space at the shelter, only aggressive animals will be taken into the shelter and will be euthanized.
- Commissioner Gibson asked Amanda if she has heard of any other counties having these issues as we are and if so, what has she observed? Amanda stated that every county is different but when she attends her Health Directors' meetings, that this is a statewide issue for the majority of the counties.
- Commissioner Gibson stated that he would like to have a backup plan for animals needing to be brought into the shelter such as another facility to take the animals to as this has been an ongoing issue for years. Amanda responded that she agrees that we definitely need a backup plan in place as the shelter is always at maximum capacity. There was a discussion of housing the stray animals in another county to help resolve this issue. Commissioner Gibson stated that it is an option we could look into.
- Amanda suggested that the shelter have more adoption events to free up more spaces needed at the shelter. Amanda stated that we did collaborate with them and held a rabies clinic at the health department on March 16th and we had 50 pets that were vaccinated that day.

Amanda discussed the Strategic Plan Goal 4: Continue to Support and Promote community wide mental health services.

- Kathie Cox, Health Educator participated in the County Opioid Collaboration

Amanda discussed Strategic Plan Goal 5: Enhance recruitment efforts, employee engagement, and succession planning initiatives that contribute to individual and organizational effectiveness:

- Cyber Incident: All staff now have some form of computer access. We have received 18 of our original computers back. They have been "cleaned" but not all applications have been added back such as Microsoft Office. The rest of the employees are still using loaned computers. All computers are hooked to MIFI because the server is not up and running.
- At the request of the County Manager, the Processing Unit Supervisor that was vacated by Deborah Rogers on February 1st has been reclassified to a Processing Assistant IV position. This was approved by the Board of Commissioners on 4/1/24. On April 3rd, Amanda was notified by the County Manager that she would like to freeze the position. After much discussion, it was agreed to hire someone for this position part-time with the understanding that it may increase to full time depending

on the budget. The freeze on positions is making increasing services difficult due to lack of sufficient staff.

- The Health Department will be hosting a county Employee Wellness Day on May 7th and May 22nd. This will include lipid and A1C screens. We will bill the employees insurance but no cost to the employee. We plan to offer a QR code with a survey to inquire about the interest in an Employee Clinic for the health department. Many county employees have complained about high deductible insurance and offering an acute illness employee clinic could help ease the burden for employees and generate revenue for the health department.
- Nutritionist II: This position has been posted for over a year. and is currently being filled by contract staff and the position is frozen.
- Environmental Health Specialist position has been posted since November 2023.
- Public Health Nurse II (Enhanced Role Nurse for Communicable Disease): This position has been vacant since April 2023 due to candidates declining salary offers.
- Public Health Nurse I position is vacant as of May 3, 2024 and this position has been frozen.
- [Stephanie Littles](#) suggested using interns from community colleges to help fill in the gaps for the shortage of staff members.

### **New Business**

#### **Department Focus: Maternal and Child Health**

- [Carlotta Rivers](#) stated that she is the Maternal Health Coordinator with Scotland County Health Department and our maternal health program has been providing prenatal care to the women and families of this community and surrounding areas since 1943 and we strive to provide personalized comprehensive prenatal care to all of our patients. The primary mission of our program is to ensure that all individuals who are pregnant with low income have access to early and continuous prenatal and postpartum care. Our health department receives funding from Healthy Mothers Healthy Children block grant funds to provide in multiple things such as incentives for some of our programs. We provide a certain amount of funding for patients who do not qualify for Medicaid to cover their prenatal care. For example, if we have an undocumented patient that doesn't qualify for Medicaid, we use some of that funding to cover their prenatal care and not just within our agency but also outside of our agency for things such as ultrasounds and other antenatal testing that may be done at the hospital. Our agreement agenda is basically what the law is for us when it comes to our program and it lets us know what we do as far as screenings, counselings referrals for psychosocial and nutrition conditions and problems, Behavioral Health assessments and also our wraparound services such as providing referrals for Care Management for high risk pregnancies.
- Joy Hawkins introduced herself to the board members as well and described her role as a maternal health nurse. She also makes postpartum home visits to new mothers to provide social support and educational services to families.

#### **Child Fatality Report:**

- [Carlotta Rivers](#) discussed the duties and roles of the Child Fatality Prevention Team (CFPT). The CFPT meets five times a year and has a variety of disciplines that make up the team such as law enforcement officers, school personnel, DSS team members, Scotland County Domestic Violence and Rape Crisis Center as well as social workers and other members of the health department and community. The CFPT discusses the deaths of Scotland County children ages zero to 17 years old. Carlotta stated that the team looks for any system problems or gaps in services that can be identified

that we can actually do something about to make an impact on the prevention of future deaths if these recommendations are made. The CFPT works with the Community Child Protection Team out of DSS. The cases that the team reviews are from deaths from a year prior. Carlotta stated that the team is required to review the CFPT reports to the Board of Health members as well as the County Commissioners annually to keep them up to date. Carlotta stated that there is a rise in deaths by firearm discharge. Dr. Johnston asked Carlotta if these deaths are accidental or intentional and Carlotta stated that they are intentional homicides.

**Approval of COVID funds for staff incentives:**

Stephanie Littles made a motion to approve the COVID funds for staff incentives. Commissioner Gibson seconded the motion.

**Approval of New Funding:**

Women’s Health Grant \$150,000  
ARPA Public Health Services \$50,000

Commissioner Gibson asked if the Women’s Health Grant was for three years. Amanda responded that is correct. Commissioner Gibson also asked about the ARPA funds. Amanda stated that there was money left with the state ARPA funds. She said we were granted \$50,000 for this fiscal year and we are going to receive another \$50,000 after July of this year.

Commissioner Gibson made a motion to approve the new funding. [Ian Yancey](#) seconded the motion.

**Informal Discussion**

Ian Yancey asked about the grant money that we discussed at the last meeting and Amanda gave Ian some items that we ordered such as computers for the mobile unit, laptops, tablets for patient surveys and an electronic sign for the mobile unit.

Dr. Singletary adjourned the meeting at 8:26 pm.