

**North Carolina Local Health Department Accreditation
Board Meeting
Cardinal Room, N.C. Division of Public Health,
5605 Six Forks Road, Raleigh, N.C.
Friday, November 16, 2018
10 a.m.— 2:30 p.m.**

Board Members Present

Bertadean Baker
Barbara Beatty
Robert Byrd
Chris Dobbins
Teresa Ellen
Susan Elmore
Ann Holton
Barbara Ann Hughes
Rebecca McLeod
Larry Michael
Jerry Parks
Phyllis Rocco
Bill Sollecito

NCIPH Staff Present

Amy Belflower Thomas
Lori Rhew
Julia Kimmel
Deanna Hedgepeth

Site Visitors Present

Tommy Jarrell
Andy Smith
Bill Smith
Leeanne Whisnant

Board Members Absent

Robert "Bob" Blackburn
Chris Hoke
David Stanley II
Benjamin Tillet

Guests - Health Department Directors and Staff

Greene County Health Department

Joy Brock

Johnston County Health Department

Marilyn Pearson
Christy Barfield
Tracy Hadjipetrou

Iredell County Health Department

Norma Rife

Union County Public Health

Dennis Joyner
Jackie Morgan
Carla Sowell

Pamlico County Public Health

Scott Lenhart
Dawn Jones
Mary Barnes
Stormy Meadows

Rutherford-Polk-McDowell District Health Department

Karen Powell

Cherokee County Health Department

David Badger

Welcome

Chris Dobbins, Board Chair, called the meeting to order at 10 a.m. He welcomed and thanked everyone for attending. Chair Dobbins acknowledged Amy Belflower Thomas, the Accreditation Administrator, and her staff for their work in preparing for the meeting.

Administrator Belflower Thomas introduced the NCLHDA Program staff, Ms. Lori Rhew, who assists with project management of the program, Ms. Deanna Hedgepeth, who many people know, is back to support the program as needed and Ms. Julia Kimmel, who will be taking pictures throughout the day. Administrator Belflower Thomas noted that the NCLHDA Program has a new website and we want to include more real Accreditation photos. She reminded people that if they did not want their photos taken, to please indicate so on the sign in sheet.

Administrator Belflower Thomas explained that we are starting a new process where we have Reaccreditation plaques ahead of time so that they can be presented during the meeting. She asked if after each adjudication, the Health Director would come to the front of the room with the Lead Site Visitor, so that a picture can be taken of health department staff getting their plaque. She explained that we will share the photos with health departments. She also reminded health departments to get the remainder of their items, such as lanyards and decals, before they leave.

Chair Dobbins asked for a motion to approve the minutes from the May 2018 Board Meeting. Board member Ann Holton made a motion to approve the minutes and Vice Chair Teresa Ellen seconded the motion. Chair Dobbins asked for any discussion, Board member Susan Elmore had one comment, ANBOH acronym should be ANCBH. Chair Dobbins asked for any additional corrections. There were none. The motion to accept the minutes passed.

Accreditation Adjudication Process

Administrator Belflower Thomas reviewed the Accreditation Adjudication process and reminded the Board members to keep in mind conflicts of interest when voting. She explained that Board members may ask questions but must state that they are recusing themselves from voting if they have a conflict of interest.

SITE VISIT REPORTS

Greene County Department of Public Health Accreditation Adjudication

Tommy Jarrell, Lead Site Visitor, noted that Mr. Michael Rhodes was the Health Director during the site visit and that he retired shortly after the visit. Dr. Jarrell spoke about the use of the new online system for evidence review and submission. He noted that this was the first site visit using the new online system for Accreditation and that it went extremely well for the Site Visit Team. Dr. Jarrell thanked Administrator Belflower Thomas and Ms. Rhew for their assistance in preparing the Site Visit Team. He noted that it was an easy system to learn and adapt to and that it makes the process much easier for the Site Visit Team. Dr. Jarrell noted the Greene Department of Public Health is a small health department, with 26 employees and that each employee wears multiple hats. Dr. Jarrell then presented a summary of the Site Visit Team Report noting that Greene County met 145 of 147 Activities; the two Activities that were not met were: 15.5 and 19.1. The Site Visit Team recommended Greene County Department of Public Health for Reaccreditation with Honors.

Ms. Joy Brock, the Health Director, approached the Board and noted it was her third site visit as an AAC and she loved the new online system that they used for this site visit. Out of all three site visits, this was the least stressful visit she has had- it made it easier- so she hopes that we can move forward statewide with it.

Vice Chair Ellen asked Ms. Brock if she could share a little about how the system works. Ms. Brock explained that she was trained on the system in February, and they started the new system in March. She explained that she had been collecting evidence for the past four years; once she and Ms. Rhew got everything up and running as far as IT, she started uploading their evidence in to the online portal system. She explained that it has many more capabilities than they were able to use this go-round and that once this process is over and she has access to the system again, they are ready to add information for the next cycle. She again noted that it made it easier and that they had a longer timeframe to put evidence into the system. Ms. Brock also noted that they were able to get questions from Site Visitors ahead of time and then had Tuesday and Wednesday to prepare and get additional evidence that the Site Visit Team asked for before they arrived on Thursday. It made it less stressful the day of the Site Visit.

Vice Chair Ellen thanked Ms. Brock for her explanation.

Chair Dobbins asked if there were any questions.

Board member Jerry Parks made a comment that ten years ago the Greene County Department of Public Health was on life support and now the Health Department is recommended for Reaccreditation with Honors. It is outstanding.

Board member Larry Michael asked about private cemetery consultation, which was listed under environmental health service- he has never seen that listed before. He thought he knew what it was but was curious if Ms. Brock could elaborate. Ms. Brock stated that she did not know.

Board member Parks made a motion to accept the Site Visit Team's recommendation of Reaccreditation with Honors; it was seconded by Board member Rebecca McLeod. The motion was passed, and the Greene County Department of Public Health was awarded Reaccreditation with Honors.

Johnston County Health Department Accreditation Adjudication

Bill Smith, the Lead Site Visitor, presented a summary of the Site Visit Team report and briefly addressed that 145 of 147 Activities were met; the two Activities that were not met: 27.3 and 30.3. The Site Visit Team recommended the Johnston County Health Department for Reaccreditation with Honors.

Mr. Smith noted that the Site Visit occurred as Hurricane Florence was rolling in, so everyone was a bit distracted. Mr. Smith noted that there were two things of note from the visit; the first was that the personnel records were extremely good- everything was flagged- and second, Johnston is noted for being a provider of behavior health. This means not just having a behavioral health specialist working alongside the clinic; they have a full unit, a provider, which is different than any other health department that he is aware of.

Dr. Marilyn Pearson, the Johnston County Health Director, approached the Board and noted that the visit occurred during the time that Florence was coming through and public health was in motion

and that a lot of what they do as public health was on display, including working with their other county agencies. She thanked her staff and recognized them for their work. She praised all of her staff, they have about 140 staff, and they all work very well together.

Board member McLeod asked how many times the Johnston County Health Department has been through reaccreditation.

Dr. Pearson replied that they had been through three accreditation cycles.

Board member McLeod asked the AACs what they have found most challenging this time around in the Accreditation process or what made it easier? Ms. Christy Barfield, a Co-AAC for the Johnston County Health Department, noted that this was her first cycle being the AAC; prior to being the Nurse Director, she was the Epidemiology Nurse Supervisor. She was involved in the Accreditation process, but from a different perspective. She stated that she likes electronic records and is excited about the portal. Hearing from Ms. Brock was very encouraging. Moving forward, she felt the online system would be an advantage to them. Retrospectively, she did not have a lot of feedback.

Board member McLeod asked if it worked well having two AACs? Ms. Barfield noted, that yes, having two AACs worked very well. She explained that she was at the Emergency Operations Center (EOC) with Dr. Pearson two different times during the Site Visit because they had to activate their EOC for Florence. However, they had assigned their roles based on their strengths and weaknesses, stating that it took both of them, certainly. She found it very beneficial and noted that Tracy was more the lead. So, when a Site Visit Coordinator came to them and were asking her questions, she was able to relay the information. She explained that they had posters in the room and she was tagging those. And then, in her role, she was working more with “these are the questions we have, and these are the questions we need to address,” how to move forward, and which questions to work with, prioritizing.

Chair Dobbins noted that they both have other jobs. Ms. Barfield noted that Tracy is their Social Worker and CC4C Supervisor and that they really don’t have a dedicated AAC.

Chair Dobbins noted that recognition with Honors is an incredible task, and that being recognized as during preparation for a Hurricane speaks volumes about their agency.

Board member Barbara Beatty made a motion to accept the Site Visit Team’s recommendation and it was seconded by Board member Bob Byrd. The motion passed and the Johnston County Health Department was awarded Reaccreditation with Honors.

Iredell County Health Department Accreditation Adjudication

Andy Smith, Lead Site Visitor, presented a summary of the Site Visit Team Report and briefly discussed that all 147 Activities were met. Mr. Smith noted that the Site Visit had been rescheduled because of a Hurricane and was still held in the remnants of another Hurricane. He also noted the power went out several times during the visit and the health department just kept going. It was a great experience. Mr. Smith noted that Ms. Jane Hinson, the Health Director, was not able to be there during the Site Visit and the management team kept going and did not miss a beat. He noted that the stress of the weather nor missing their health director slowed them down. Kudos, because they have a dynamic management team.

The Site Visit Team recommended the Iredell County Health Department for Reaccreditation with Honors.

Chair Dobbins stated “wow,” and Mr. Smith stated, “that’s what we said.”

Board member Susan Elmore asked if Accreditation is something that they prepare for all year or do they wait until closer to the time of the Site Visit? How do they approach Accreditation?

Ms. Norma Rife, the AAC, who attended in place of the Health Director, Ms. Jane Hinson, stated that the management team is in place and has been in place for more than 20 years each except for one person. Ms. Rife stated that she has been leading the Accreditation Team for each of the Site Visits. So, there is a lot of continuity in place right now. She explained that they use the CATT tool, which is short for the category assigning and tracking tool, which helps them identify each year what evidence is submitted and what needs to be submitted. This process spans the four years and they have audit hand touches through throughout each year, not just each year, but throughout each year.

Chair Dobbins again stated “wow.” Ms. Rife mentioned that she wished Ms. Hinson could attend the meeting and that she will be back in January. Ms. Rife explained that the evidence they had to submit this year was superior to what was submitted the previous years. So, it is not just about coordination of the evidence, it is also the quality of the evidence- it was more substantial. It was nice for an AAC to see that as it makes the job easier.

Board Member Byrd asked if their health department was consolidated. Ms. Rife replied that it was not; it is a stand alone.

Board member Parks noted that he has been doing board trainings and you can tell when a board is engaged and when it is not. He said that he assumed, but asked Ms. Rife to confirm, if they had an engaged board of health. Ms. Rife responded that they have sub-committees and special projects for the Board. She explained that they have several roles and just about everyone on the Board is very engaged and very supportive. She also noted that Sylvia Chapman, a Site Visitor for the NCLHD Accreditation program, is on their Board. Ms. Rife noted that Ms. Chapman is wonderful and very supportive. She is the Vice Chair now with a retired practicing surgeon who is very engaged. Everyone is very engaged, and their training is an on-line- self-training. And they do trainings throughout the year.

Board member Barbara Beatty noted that Iredell is very diverse and is going very fast. She asked Ms. Rife, how they work in the different areas of the county.

Ms. Rife noted that there is a fine line between north and south Iredell, but they have engaged the mayors with each area and work with the municipalities on different health promotion activities. They also have a substance use coalition; she noted they have a wide span in members, with a lot of municipalities represented on the coalition. And due to the previous Healthy Carolinians model, they already had some good partners in place. She noted that they are lucky to have a lot of good partners not only at the local level, but also at the regional level and the state level. Part of the reason is that they have had staff in place for so long, those relationships have been built over time. Board member Barbara Ann Hughes asked if Ms. Jane Hinson was the last person to come on board because she had not been there that long, has she? Ms. Rife responded that Ms. Hinson has been on board four years; she came on board right before the previous Accreditation audit. It has been almost four years now. She is very dynamic, and Ms. Rife noted that she is proud of her leadership.

Board member Barbara Ann Hughes noted that Ms. Jane Hinson has been an officer of her Association, the Local Boards of Health, so she does know her.

Board member Ann Holton made a motion to approve the Site Visit Team’s recommendation for Reaccreditation with Honors. The motion was seconded by Board member Elmore. The motion passed and the Iredell County Health Department was awarded Reaccreditation with Honors.

Union County Health Department Accreditation Adjudication

Andy Smith, Lead Site Visitor, provided the summary of the Union County Site Visit Team Report. He noted that one of initial things the Site Visit Team noticed was how dynamic and engaged the Human Services Board was, especially the Chair, who was so inquisitive and wanted to learn more about public health. He reported that the Site Visit Team designated 145 out of 147 Activities as met; he discussed the two Activities not met: 31.4, 38.1. The Site Visit Team recommended the Union County Health Department for Reaccreditation with Honors.

Chair Dobbins congratulated Mr. Joyner.

Mr. Dennis Joyner, Health Director, approached the Board and explained that he had been through two Accreditations in one year. He was in Stanly County prior to joining the Union County Health Department. He noted that, as in any department, you are only as good as the staff you have and much like the others, Jackie Morgan and Carla Sowell were critical in helping them get to this point. He noted that Union was a consolidated county and that much like Iredell, it has a lot of Mecklenburg County influence, urban influence. In Iredell, it is a north - south difference, from rural to urban, they have an east to west difference. So, it is a dynamic county. He further explained that the department went through four structure changes over the four years of the Accreditation cycle. Between the County Commissioners serving as the Board of Health, Human Services serving as the Board of Health going back to the Board of Commissioners as the Board of Health and finally back to the Human Services Board. So, there were a lot of adjustments and changes during the Accreditation cycle and he commended staff for all of their work in the process. He explained that he had very little to do with it, coming in at the last hour.

Board member Hughes asked what determined all the changes?

Mr. Joyner responded, politics. The structure of the arrangements.

Board member Parks noted that he does some of these board of health trainings. He prefaced his comments by saying it is not their fault; they have too much responsibility. He noted that a Board of Commissioners serving as a Board of Health is the least engaged group. He worked with a county and it was so bad, the Assistant Manager met him in the hallway after the training and apologized because they had something big coming up and that is what they are all working on. Board member Parks noted that he understands that these board members have many responsibilities. Commissioners need to understand that their responsibility is so vast and so far-reaching that they do not have to take this on; it is not fair to the health department. He noted that he said this as an outsider.

Chair Dobbins notes that Board member Parks makes good points, for those of us that have experienced both stand-alone Boards of Health, Consolidated Boards of Health, and Human Services

Boards. To add that responsibility to a commissioner's job is asking a lot. He added, that clearly, Mr. Joyner inherited another great team.

Board member Hughes made a motion to approve the Site Visit Team's recommendation of Reaccreditation with Honors; the motion was seconded by Board member McLeod. The motion passed and the Union County Health Department was Reaccredited with Honors.

Pamlico County Health Department Accreditation Adjudication

Andy Smith, Lead Site Visitor, provided a summary of the Site Visit Team Report and discussed that 77 out of 147 activities were met. Mr. Smith noted that the health department currently has 11 staff members. The Site Visit Team recommended Pamlico County Health Department for Conditional Reaccreditation.

Chair Dobbins noted that Conditional Reaccreditation is not a common experience; there are processes in place for Conditional Reaccreditation. He noted that we would not go through every single discrepancy of the visit, but certainly he wanted to hear from the Health Director. He asked Mr. Scott Lenhart, Health Director, to please share his thoughts on this and what is next.

Mr. Lenhart approached the Board and noted that he accepted full responsibility for Accreditation. He explained that he came, half-way through the cycle, to a health department that lacked a few things- staff was one of them. He explained that they were supposed to have sixteen individuals. Shortly after his arrival, the AAC left. When she left there were issues that came about; in addition, most of the staff on the Accreditation team, or all staff, had never taken part in the Accreditation process, ever. He explained that they discovered a few deficiencies in all of that, with some other issues coming up, it was hard to meet some of the Benchmarks; also the Hurricane did not help. He explained that the Site Visit did not happen because they had no place for the Site Visitors to go; it was one-week after the Hurricane. He explained that he contacted Administrator Belflower Thomas and she will be coming down to help them get more organized, and his management team knows that in a week or two, they will be setting up the schedule to go through the full Accreditation process in the next two year. He noted that he has been through the Accreditation process five times now.

Chair Dobbins confirmed that they currently have eleven staff. And he asked, how many people they have when they are fully staffed? Mr. Lenhart replied they have sixteen people when they are fully staffed. Chair Dobbins noted that meant that they were down approximately 50% of staff. Mr. Lenhart confirmed this was correct.

Administrator Belflower Thomas explained the Conditional process. She explained that when a Site Visit Team recommends a health department for Conditional Reaccreditation it goes to the Appeals Committee. And the Appeals Committee, Chaired by Board member Elmore did meet. She explained that in their electronic packet and in their folder, the Board members should have the Appeals Committee Report; it is for both counties being recommended for Conditional Reaccreditation. Administrator Belflower Thomas explained that the committee did recommend upholding the Conditional Reaccreditation recommendation; they also discussed the process for the health department to become Accredited. Administrator Belflower Thomas noted that in the NCLHDA Process Operational Guidelines, it explains that the Board will give the health department a written response to how the health department should proceed. The Appeals Committee discussed, and it is in the report; essentially, it comes down to the health department compiling a corrective action

report that they submit in the next couple of months. The Appeals Committee recommended that the NCLHDA program assist them with filing the report, especially around prioritizing activities and send them a reminder about resources and training, such as the regional workgroups etc.

Chair Dobbins asked if it was unanimous by the Appeals Committee. Administrator Belflower Thomas confirmed that it was.

Chair Dobbins asked if there were any questions from the Board.

Board member Parks noted that this whole process was designed to raise health departments up; when they started Accreditation, that was the goal, it was never to put anyone down. Board member Parks offered to do a Board of Health training for Pamlico. He noted that today is more positive than some might say. He explained that we have a friend in need, a health department in need, and that we should reach out. He did not want Mr. Lenhart to leave the room thinking this is anything but an opportunity to raise them up.

Lead Site Visitor Smith noted that the health department did do all that they could do with the documentation.

Chair Dobbins noted that he was not as familiar with the contiguous counties in the east, but he would think that the availability of resources is certainly a challenge. To Board member Parks' point, he asked how the Board could help them.

Administrator Belflower Thomas noted that there are regional work groups and that AACs in counties around Pamlico are doing well, so the workgroup is a highly suggested resource.

Mr. Lenhart noted that Stokes County was very helpful. He stated that since they did not have a site visit, they were not able to present additional evidence and that in the first two years they missed a lot of the yearly items that it would not change the outcome.

Chair Dobbins asked if there was anything that the Board could do to reach out to their local leadership, elected official, or county manager, that would help them? He also noted that Board member Jerry Parks is a great ambassador to be that conduit.

Mr. Lenhart said that he has a few ideas of what he would like to see happen in the county. He explained that the culture of public within the county is something that has been lacking for a long time. And that is one thing that they have to change. He explained they are doing this by having a series of articles in the newspaper explaining what public health does and what each section of their health department does. He explained that changing the mindset of what public health is in the county is the first thing that needs to be done.

Mr. Lenhart stated that he was without a Health Educator or a Preparedness Coordinator right now and noted that the Board members recognized how important those are to the Accreditation process.

Board member Beatty asked if they have an opportunity or potential to fill the six empty positions? Is there anyone? Applications or anything?

Mr. Lenhart responded that he has advertised three times since he has been there and has hired one person, however, he had to let them go in six months.

Chair Dobbins asked if the possibility of Pamlico becoming a health district has ever been discussed.

Mr. Lenhart responded that when he first arrived at the health department, there was discussion when Jill Moore came down and joined him and the health department, and the county commissioners. He explained that they were having issues with prior leadership, but due to changes in leadership, they voted not to consolidate or redistrict.

Board member Holton stated that she will recuse herself from voting because she was on the Pamlico Board of Commissioners and offered that she should leave the room if Mr. Lenhart would like to share something without her present because she sat on the Board of Commissioners. Mr. Lenhart did not request Board member Holton to leave. Board member Ann Holton remained in the room.

Board Member Byrd made a motion to accept the Site Visit Team's recommendation of Conditional Reaccreditation, and Vice Chair Ellen seconded the motion. Board member Ann Holton recused herself from voting. The motion passed and the Pamlico County Health Department was Conditionally Reaccredited.

Rutherford-Polk-McDowell (RPM) District Health Department Accreditation Adjudication

Leeanne Whisnant, Lead Site Visitor, presented a summary of the Site Visit Team report. She noted that the site visit was held right before a major equestrian world event. She explained that Polk County is a very small county and, in public health, with a world-class event, this is the first she has known. Ms. Whisnant noted that the District has a very vibrant Maternal Health Program, probably one of the most vibrant that she has seen. They also have a Nurse Family Partnership Program and the District sold their Dental Program in July 2018. She explained that the District has had a lot of challenges. She explained that the Site Visit Team felt bad being there because they had really been hammered; preparing for the world event had taken tremendous effort. The Site Visit Team felt how lengthy that preparation process was, especially for the environmental health staff, which was already limited, and they had already had challenges for a long time. Especially environmental health, there were tremendous back logs for new building, especially in one of the counties where the economy was really booming. So, an already stressed staff, and then to add that preparation to them had to be challenging. It was noted there have been many, many challenges with a natural disaster, a mud slide, and with retirements and turnover. They had 20 new staff hired in the nine months prior to the Site Visit. She noted how this made preparing the personnel records challenging. And they have a staff of 88, so 20 out of 88, again, you can see that percentage. In addition, they had a new electronic medical record system added in 2017. They have hired their first ever full-time Family Nurse Practitioner. Ms. Whisnant noted that overall, the health department has made some really good progress towards things that in the future will make a big difference. They have increased their client utilization, and they have a new playground at the McDowell facility. She reported that they met 127 out of 147 Activities. The District did provide additional materials that were reviewed after the site visit.

Ms. Whisnant noted that the original recommendation after the site visit was Conditional Reaccreditation and after the addendum material review, unfortunately, they had to uphold the Conditional Reaccreditation recommendation as they still lacked 25 out of 29 for the Assessment Standard where 26 is required. Chair Dobbins requested clarification on the number of Activities they got correct in Assessment; Ms. Whisnant clarified, they got 25 out of 29 activities correct in Assessment.

Chair Dobbins asked for any additional comments.

Administrator Belflower Thomas noted this is the same process as just discussed for Pamlico. The Appeals Committee Report and recommendations apply to RPM as well as Pamlico.

Ms. Karen Powell, Health Director, approached the Board and noted that the health department has had quite a lot of the turnover. When she took over as Health Director two years ago, her complete management team turned over, due to mostly retirements; it hit all at the same time, so her management team is pretty much 100% brand new. This was two years into the cycle, and she did not have an AAC. So, she became the AAC for the next year so that they had an AAC for the last year of that time. She explained that they felt like most of the things they already had in place and that they were doing yearly reviews. And so, when it came down to the end, a lot of people that had left, took that knowledge. She explained that they felt like they did a great job considering where they were with the staff of three counties. She explained that they did prepare for the equestrian event for almost two years – that was quite the challenge, however, she realized that other counties have their big events too. She explained it was really an environmental health event for them and they have one environmental health specialist in Polk County. She explained that she was told in the beginning that they would need about 50.

Ms. Powell stated that they really enjoyed the Site Visit Team being on site. During the last Accreditation cycle, it felt very different. She stated the team was so fun and so positive and that they appreciated their support and the guidance they gave for moving forward.

Board Member Hughes asked if they were recruiting from other states like Georgia and Tennessee. Ms. Powell responded they are recruiting from everywhere and have been.

Board member Larry Michael stated that for the world equestrian games, their staff did great. He explained that to have 20,000 – 50,000 people in the county every day for two weeks straight, the infrastructure they had in place was a huge lift and that the environmental staff were available 24/7. He commended the effort that the health department provided for that event.

Board member Parks noted that he had said this before, but please don't leave this room thinking we have any goal other than to raise you up. He commended them for raising their budget 3% over four years; he said that may not sound like a lot, but says that you have county support and that is good. He asked Administrator Belflower Thomas for clarification regarding Conditional Reaccreditation; he asked if Conditional Reaccreditation was a re-set and would they be responsible for meeting the Standards from this point forward.

Administrator Belflower Thomas explained that it is like a probationary status. RPM will need to submit a corrective action plan- the same as Pamlico. The corrective action plan addresses everything that wasn't met and how they will improve over the next four years. Then, at any point in the next two years, they can create new documentation; unlike right after the site visit, they can submit brand new documentation to bring them up to where they were missing the Standard. So, currently they are missing one Activity within one Standard. Whenever they are ready, they can approach the Board for reassessment and it can be as early as May. However, she explained that it does not reset the clock on their Accreditation cycle timeline.

Chair Dobbins clarified that, in this case, within the next six months they can submit additional information and after that they can ask for reassessment to get them to the Standard. Administrator Belflower Thomas confirmed yes, and they stay on the same four-year schedule.

Chair Dobbins asked for questions or comments from the Board.

Board member Hughes stated that she does not see how they did it.

Chair Dobbins noted that even though it is a horrible cliché, it was a perfect storm, in both situations. He stated that the job is difficult enough on a normal day without the turnover or the vacancies and that the storms and the world events doesn't help.

Board member Parks asked, there is talent and knowledge that is exiting our field and how do we replace that knowledge? Chair Dobbins noted the Iredell is a great example. He stated that the Iredell County Management Team has been in place for how long? The continuity is important.

Board member Hughes noted that Board member Michael recruited environmental health staff outside the county to assist with the equestrian event. Mr. Michael confirmed that there were about twelve counties involved to help and all the state staff, as well.

Administrator Belflower Thomas noted that as a program we are held to legislation and we cannot let Accreditations expire. People may ask, when something like this comes up, can't we just push back their site visit. Unfortunately, we can't we get around that in legislation. However, she did explain that whenever a health department is having an issue, they can always contact the program office for accommodation as much as possible; for instance, Ms. Powell contacted her and let her know early, and they were given first choice this cycle and their site visit was set before the other counties because it is an extraordinary situation. The same thing with Pamlico- she and Mr. Lenhart talked about the best way to move forward. She explained that although her hands are tied with legislation, as a program, we try to support the timing as best as we can and will do that for other health departments as well.

Chair Dobbins asked for any further questions or comments.

Board member Beatty made a motion to accept the Site Visit Team's recommendation for Conditional Reaccreditation. Board member Hughes seconded the motion. The motion passed and the Rutherford-Polk-McDowell Health District was Conditionally Reaccredited.

Cherokee County Health Department Accreditation Adjudication

Leanne Whisnant, Lead Site Visitor, provided a summary of the Cherokee County Site Visit Team Report. Ms. Whisnant noted that Cherokee borders three North Carolina counties, two counties in Tennessee and two in Georgia. They have a small population of 27, 444. She reported that the Cherokee County Health Department has thirty employees and that the county continues to struggle. She explained that some of the larger counties and other areas in North Carolina have bounced back more quickly from the recession, and their unemployment has bounced back. However, Cherokee County continues to struggle; their unemployment rate is 11.9%. They still have some challenges. She reported that they were able to meet 139 of the 147 Activities and briefly discussed the Activities that were not met: 2.4, 5.1, 5.2, 15.1, 16.1, 21.4, 24.3, 34.3. The Site Visit Team recommended the Cherokee County Health Department for Reaccreditation.

Administrator Belflower Thomas called the Board members attention to their packets where there was a written response for Activity 5.2c. She explained that she investigates concerns and renders her opinion. She explained that the county has an argument for part of the Activity, however, even if that is true, they do not meet the full requirement. Therefore, the Activity is still not met because they did not meet the entire Activity.

Chair Dobbins clarified that it was a technical correction in the report.

Mr. David Badger, Health Director, approached the Board and thanked his staff, the Board of Health and community partners who were all engaged in this process. He explained that like many people, he came in mid-stream and there was a lot of turnover. There were a lot of challenges; with that said, there were a lot of opportunities. He stated they have a young staff that are engaged and committed to support public health. He also thanked the Site Visit Team, who challenged them and provided insight. He noted that it was his first time going through the Accreditation process and the Site Visit Team was engaged and dynamic and that overall a good time was had by all, he hoped. It was a good process.

Chair Dobbins asked for questions or comments from the Board.

Board member Elmore made a motion to approve the Site Visit Team’s recommendation for Reaccreditation. Board member Hughes seconded the motion. The motion passed and the Cherokee County Health Department was Reaccredited.

Chair Dobbins asked the Board if it was okay to change the agenda and instead of breaking for lunch the Board would move the sub-committee reports up. The Board agreed.

Committee Reports

Appeals Committee

Administrator Belflower Thomas reported that the Appeals Committee met and that their report is in the Board members’ packets. Committee Chair, Susan Elmore, did not have anything to add to the committee’s report.

Chair Dobbins thanked Committee Chair Elmore and the committee members for their work in reviewing the appeals. Chair Elmore noted that she is very appreciative of the committee.

Administrator Belflower Thomas thanked the full committee, noting that the Appeals Committee is one of the most important and that were high stakes for them. The program appreciates their work in looking through the evidence of these counties.

Policy Committee

Committee Chair, Dr. Bob Blackburn, was planning to join the meeting via phone at 12:15 p.m. Since the meeting proceeded ahead of schedule, Administrator Belflower Thomas reported that the Policy Committee met, and their main agenda was to approve updates to the Operational Guidelines. She reminded the Board that last year, all the policies and procedures were pulled together into three sets of Operational Guidelines. She explained that we were going to model the way that health departments are required to review their policies every year, by reviewing our policies annually as well. She noted that slight revisions have been made and instructed the Board members to note the Operational Guidelines their packet. She explained that in the front of each of the Operational Guidelines, there is a *Record of Revision* which lists all of the changes that were made. Administrator Belflower Thomas explained that the committee reviewed the changes, met and approved all of the changes. The recommendation from the committee is for the Board to accept the changes as is.

Chair Dobbins noted that a motion from a committee does not need a second. He asked if there was any discussion. There was no discussion. The motion to adopt the revisions to the Operational Guidelines passed.

Standards and Evidence Committee

Chair Dobbins, also the Chair of the Standards and Evidence Committee, noted that the HDSAI Interpretation Document update is in everyone's packet. He explained that these changes are clarification to the evidence, or Standards. If there are any regulatory changes, those need to go to legislation, so the changes here are recommendations from the committee and, for the most part, clarify evidence.

Chair Dobbins asked if there were any questions. He stated that the recommendation from the committee is for the Board to accept the changes as written.

Board member McLeod said that she appreciates the updates, it does help clarify from a health directors' standpoint.

Administrator Belflower Thomas noted that we don't make changes to make changes. We gather information and survey Site Visitors after site visits to see where counties may have confusion. There is also a section in the Site Visit Team Training each year that focuses on what would be helpful to clarify for them. So, that is where we get the changes each year. She explained that we do not want an agency to miss an Activity because they don't understand, which is why we make the changes we make.

Board member Hughes asked if this document is what the Site Visit Team uses when they visit with a county. Chair Dobbins stated that it is both, it is used by the county and it is used by Site Visit Team to clarify the evidence. It is twofold. Administrator Belflower Thomas added that the HDSAI Interpretation Document is the guideline for agencies to use and it is exactly what the Site Visit Teams use.

Board member Phyllis Rocco stated that as a member of the committee that reviewed the Interpretation Document changes, there is one element on page 4, Activity 33.5, that required a change in timeframe to require it to be annually. She wanted to clarify that for the Board. Administrator Belflower Thomas noted that we don't often make a time requirement change. She explained that the changes to the HDSAI Interpretation Document will go not in to effect until the fall site visits of 2019. The changes will not be applied to the counties that have already received their notifications. Also, counties will not be held to it for previous years.

Chair Dobbins asked for any additional question or comments. There were none. The motion to adopt the revisions to the HDSAI Interpretation Document passed.

Chair Dobbins noted that the Board was still ahead of schedule, so they will move on to new business.

New Business

Update on May 2019 Board Meeting Date

Administrator Belflower Thomas noted that first order of business was to discuss the May Board meeting. She explained that generally, we try to meet the Friday after the Local Health Director's

Association meeting which is on Thursday. Unfortunately, there is a conflict this year, and we cannot meet on that date for the May meeting. She explained that Chair Dobbins and Vice Chair Ellen met, and they approved changing the May meeting to May 10 and they want to make sure that the Board is okay with the change. Administrator Belflower Thomas explained that the Cardinal room at the N.C. Division of Public Health is not available, however, we are able to meet at the Durham County Human Services Building. It is a beautiful facility with good parking. The meeting time will stay the same.

Fall 2018 Cycle Report

Administrator Belflower Thomas referred Board members to the Fall Cycle Report in their packets. She explained that the Reports are a one-page snapshot for the Board to see how the current cycle compares to other cycles. It allows that Board and the program staff to see if there are any trends. In general, there is skew in the data because of the two Conditional Reaccreditations in this cycle. She noted that Activity 30.6, the cleaning and maintenance of equipment, is one that we have struggled with for a long time, and we have seen less of that Activity being not met, which is a good thing. She explained that we as a program struggle with this Activity and agencies struggle with this Activity. She noted that we want to make the Standards rigorous but achievable Standards, and the changes that we made last year seem to be going well. She noted that over half of the counties this cycle were Reaccredited with Honors and that the Board saw good breath and diversity in the types of health departments that have received this status.

Administrator Belflower Thomas asked if there were any questions regarding the cycle report.

Chair Dobbins noted that the Board has discussed in the past, at least to some degree, that if everyone is passing or getting Accredited with Honors, are we really evaluating what need to be evaluated? And he thinks that is a fair question. He stated that what he saw today is that there is a cross-section; Accreditation is not a rubber stamp and there are Standards in place and they are evaluated regardless of the circumstances and that we have a process by which we will review that, and we have process by which we will make a final determination, and so kudos for continuing to look at this and refine, as needed, to make it substantial and not just a rubber stamp.

Board member Bill Sollecito noted that if we want to think of Accreditation as a continuous quality improvement exercise, it does open the door a little bit for the question that Chair Dobbins just brought up. The question is, "how do we ensure that people are continually improving if everyone is hitting all the marks?" He stated that he does not know what that process would be or what else could be done. He suggested that this is probably something for the next person to pick up also; he noted this is his last meeting and Anna Schenck is taking his place. He explained that this question is something that can be considered from the academic side, and the question is "how do you ensure improvement?" He explained that this is not something that only our Board is discussing; PHAB is talking about how accreditation is about improvement. Accreditation is not about penalizing people- it is about helping people get better. He stated that he does not have an answer to his question, however, it is something that should be talked about a little bit more. It is not a rubber stamp, but there should be some mechanism for looking at other ways to move forward, especially given how public health is changing.

Chair Dobbins noted that he had a few side bars with other health directors and one of the comments he received, was "okay, so it goes away. So what?" He explained that unfortunately, that line of thinking is out there as well, so educating leaders, educating elected officials about why it is

important, why it does make us better, why it continuously improves our work and efforts is important. He stated that this is an important job for all of us and we have got to show value in the Accreditation Program. He noted that Administrator Belflower Thomas, her staff and this Board, are very serious and if everyone gets Accredited with Honors, then he doesn't think this is really getting the bang for the buck that we want. Certainly, we need to continue to refine the process, and understand and demonstrate the value of Accreditation and public health. He explained that from the social services side of his work, they are interested in Accreditation and getting that stamp of approval. So, there are a lot of people outside of public health that understand the credibility and the importance of it. Our job is not to lose it and to continue to educate people about how important it is.

Board member Parks noted that this was a good point. There are a lot of people that don't understand public health. He explained that the way that we handle, and he thinks correctly handle, the two we had today, goes a long way. Because if we get someone's feathers ruffled, Accreditation can go away. He stated that the way we handle these in the future, and he thinks we handled, very well, today, and we have a plan in place to give them a leg up.

Board member Sollecito noted that one of the great trends that has seen in the last five years, is what is being discussed now – public health is truly embracing quality improvement. He explained that medicine has been doing for it a while, and they still have a long way to go, in terms of safety especially. However, public health has really embraced quality improvement and it something to continue to build on. He also noted that another comment he heard today is that of invisibility, and because public health is so good, people take it for granted. So, we need to look for ways to ensure this does not happen and look for ways to keep improving.

Administrator Belflower Thomas noted that as a Program, we have been trying to share best practices that are seen by Site Visitors in different counties. She shared an example from Transylvania County, where the health director puts together a report after their site visit and reflects back on the past Accreditation and shows the trends of how they have done in the past and how they are doing now. So, if they are doing great or not, they are looking at where they are trending over time and truly showing quality improvement. She explained that we shared this story in the monthly highlights that goes to AACs across that state. She further explained that this is one good way to not only engage the board of health, but to emphasize quality improvement over time whether you are missing one or two or not.

Board member Hughes stated that she would like to see us implement this technique.

Chair Dobbins made two additional comments on where the Board was headed. He stated that the theme this morning was continuity. For the individuals that did well, continuity was clearly in place and that also translates to the staff here, to the Board also; we have had consistency of staff, we are getting traction, and we have leadership. But, as someone who has read a few things about leadership, one of the things they talk about is leadership in the absence of a leader. So, putting those things in place that will maintain things in your absence or in the absence of continuity is probably taking it to the next level. He noted that how an Iredell does that beyond retirement of a very well-seasoned staff is their next hurdle to clear. Then you have counties that have already experienced that, so the lesson learned there is how do a build a bridge to overcome some of this? Of course, how can you build a bridge when you are down 15 people? Hearts go out to a very small county like that, but certainly there is always work to be done with quality improvement.

Ms. Rife asked if she could approach the Board. She stated that their agency did well, but that does mean that in those four years that they did not have to work hard to improve internally. She explained that there were many areas where they need to improve and that a health department may do well one cycle in a specific area, but that does not mean that you are set up to do that in the next cycle. She noted that in public health, sometimes opportunities present themselves that filter into Accreditation because it matches better with Benchmarks and some years you may not. She further noted that policies are always a challenge. She explained that she wanted everyone to know, and she thinks that all the AACs would agree, this work is difficult and to reach Accreditation with Honors or Accreditation at all you are accomplishing something. She further explained that if you are working on accomplishing that than kudos to you. She noted that there is a lot of work that goes into quality improvement; it is like the final exam- you study hard, you fix things, you learn along the way. It is very valuable.

Chair Dobbins thanked Ms. Rife for her commentary. He noted that the Board sees the final product and the report; they don't necessarily see what is going on behind the curtain. Ms. Rife noted that is challenging and adds value.

Board member Sollecito noted that one of the problems, that he suggests others know more about than he does, is the optics to people who are critics and say, "what do you need this for? Everybody passes." The other comment he heard is related to staffing; he explained that one of things that they try to teach people is to create a culture of quality, and when you do, that the culture becomes the leader. So, when you lose staff, you can cope with the change. But the culture is something that can go on. There are a couple of little things like that, that are more academic than real sometimes. The question is how you convince the people that are creating the laws and the rules that it really takes a lot of work and that it is worth the money.

Board member Parks stated that his argument is with JACCO- if everyone passes JACCO, are we going to do away with it?

Board member Byrd noted that they are really getting into the star systems and rankings. He heard last week that UNC has passed Duke in stars. He explained that it has gotten to be more than about the number of stars you receive than the process.

SEI Statements and Ethics Training

Administrator Belflower Thomas reminded all board members about their Statement of Economic Interest (SEI). They are due every April. She asked Board Members to please pay attention to when they get the SEI emails and send them in. She explained that she thinks they use Tax Day, April 15, as the deadline, so make sure you get the SEIs submitted. She happily reported that everyone was in compliance with their ethics training. She thanked everyone for keeping up to date with their trainings.

Updates on Trainings, Electronic Portal and Networking Application

Ms. Rhew provided a quick overview of the Accreditation training program:

- Annual Skills-Building Workshop
- New AAC training – offered two times per year
- Team-Based Training – offered by request
- Annual Update Webinar

Ms. Rhew reported that the Annual Workshop was offered August 6-7, 2019 in Durham. There were 101 participants in attendance. She explained that the focus of the Annual Workshop is on practical skills-building for the skills that AACs and other health department staff need to be successful with Accreditation. She reported that there is an AAC Advisory Committee that helps determine what should be addressed at the Workshop. She explained that the 2018 Workshop focused on three key areas: planning successful site visits, writing effective narratives and engaging staff for a successful site visit process with a focus was on engaging staff throughout the entire process. She reported that we are looking to hold the next Workshop August 8-9, 2019 at the Friday Center in Chapel Hill. She explained that the focus of the Workshop will be on the new electronic portal and we have also talked about focusing more on quality improvement, change management and similar topics that are critical for the Accreditation program. She explained that we are working under the advisement of the AACs to let us know their greatest needs and how we should structure the Workshop.

Administrator Belflower Thomas noted that we wanted to focus the Annual Workshop on building up technical skills of AACs around things that we know counties struggle with, for the first couple of years. She explained that where we want to move towards, is where the Annual Workshop really focuses on quality improvement and bigger picture things and how to do things better, less technical on meeting certain Activities. She noted that we needed to get the technical taken care of when we developed the training program, but we are moving more in that direction.

Board member Parks stated that he is seeing new things with the Site Visit Teams; he is seeing new names with Site Visitors and new Site Visit Leaders. Early on, he stated that he could look at a list and tell you know what was going to be cited almost. But he does not see that anymore; he thinks the program is doing a good job with interpretation and a good job of educating people. He stated that people have pet peeves; when he was in environmental health, he was a sanitarian, he had pet peeves. He noted that Administrator Belflower Thomas has done a good job of taking that out of the process, which he thinks is important. He noted that she has done a good job of making the process so much fairer.

Administrator Belflower Thomas appreciates the patience of the Board and the counties over the past three years for the program to get back up to speed. It was a transition from when the legislative funding was taken away years ago; we transitioned to the new budget with the fees paid by the health department and it took a couple of years to transition. She appreciated the positive feedback. She notes that it does have a lot to do with the Site Visitors that we have in place now; they are committed to doing the right thing, to going to annual meetings and getting on the same page about their objective assessment.

Chair Dobbins noted that not only has funding been taken away, however, the Nurse Consultants are no longer available. Essentially, health departments are standing on their own. He noted that in some ways that is a good comment, and, in some ways, there are challenges.

Board Member Hughes noted that as she recalled, the counties are now putting funding in a pot to fund this process throughout the state and everyone is managing to take care of that? Chair Dobbins confirmed, yes, so far. She stated that people from outside of North Carolina say to her, "how do you fund that?" So, I wanted to remind new people that is how it is happening.

Chair Dobbins noted that it is more cost-effective process than PHAB.

Board member Hughes did note that there was some money put up front years ago to get the program started.

Administrator Belflower Thomas noted that this was a good point to bring up. She explained that our Program did present at the National Boards of Health Conference back in August and we talked about our state system, because it really is an alternative to PHAB. She explained that at the end of the day, you can look at PHAB and they are doing a great job; she stated that she thinks their latest number is that 80% of all citizens across the United States are covered by PHAB Accredited health departments. Unfortunately, the flip side of that is that only 25% of local health departments are accredited through the system; she explained what that means is that the big, well-resourced health departments are mostly the ones being accredited. And so, you are still struggling with the smaller and rural health departments not being accredited and you might say, those are the ones that need it a little bit more. And I think that, at the end of the day, the great thing that we have in North Carolina is 84 health departments, no matter what their size, are on their way to Accreditation. Even if they are challenged, they are on their way to getting there and no other state can say that. She further explained that unfortunately, the fees are still a challenge; we try to keep them as low and we can, and they still are much lower than PHAB. She noted that certainly, some health departments across the state are interested in PHAB and pursuing PHAB on top of Accreditation and that is fine, and we support that for them. Accreditation is a great opportunity for the smaller health departments, it is more feasible, even with our fee structure than other alternatives.

Administrator Belflower Thomas noted that Cabarrus and the Burke County Health Department have pursued PHAB Accreditation.

Board member Parks asked if PHAB recognized us or do we recognize PHAB? Is there reciprocity between the programs?

Administrator Belflower Thomas stated that our program is through legislation and the legislation says that we must have our process. Regarding the question of does PHAB recognize our Accreditation program, she responded, "not formally,"-she had not pressed that issue. But she tries to keep her ear to ground, for example, if any funders, CDC, private funders, etc. require PHAB Accreditation for something, that is what she is trying to keep her ear to. If she ever starts seeing that, we are going to have to start pushing it with PHAB, a little bit more. She noted that there are a couple of counties still looking to do PHAB right now. But they still have to do both and PHAB is a lot of money.

Ms. Rhew continued with the training report explaining that we offer an AAC training in conjunction with NCPHA every year and, of course, as many are aware, NCPHA was postponed until December, so we have postponed the training. We have 14 participants registered at this time; the number may go up as registration closes November 30 and the training will be held Dec. 11. She explained that the focus of this training is for new AACs to learn their role, the Accreditation process and to leave more confident in their role as an AAC. She noted that this training is offered twice per year. And that after it is offered in December, we will be offering it in the spring in the eastern part of the state. So, we offer it two times per year- once in the east and once in the west.

Ms. Rhew reported that Team-Based trainings are offered at no cost to health departments if they request technical assistance from the N.C. Institute for Public Health through their local AHEC. Once their request is granted, we will provide the training for their entire team. She explained that the focus of the training is an overview of the Accreditation process so that all team members can

understand the process. To be successful, AACs need the involvement of many staff and staff may not always completely understand the process and their role, so we really try to convey this in the training. We have offered five team-based in FY 17-18 with 107 participants representing 11 local health departments or districts.

Ms. Rhew reported that the Annual Update Webinar will be held on January 22. She reported that it is requested that all health departments have at least one representative on the webinar. She explained that during the webinar, we review all of the updates made to the HDSAI Interpretation Document, Operational Guidelines changes and any other program changes or updates.

Ms. Rhew provided an update on the new electronic portal. She reported that they have been pilot testing a new online system with five counties. The online system allows health departments to submit their evidence electronically, Site Visitors can review the information electronically, and the information can be added to the system during the Site Visit. She explained that they have piloted the system with five health departments and Ms. Rhew noted that Ms. Joy Brock and the Greene County were the first health department to go through the site visit process using the new portal. There is another site visit scheduled in January with Albemarle Regional Health Services, who is also using the new portal. Ms. Rhew asked Administrator Belflower Thomas to provide an update on the process of moving forward with the portal.

Administrator Belflower Thomas reported that the portal was presented to the Health Directors Association this week and after a year-long pilot, we feel like it is the way to go. Unfortunately, the new system does come with a cost. She explained that fortunately, there have been cost efficiencies within the program by moving to the portal, so we did not have to pass the full cost of the portal to the health departments, however, there is a need to increase fees. The fee increase was approved yesterday by the Health Directors Association, so we will be able to move forward with the portal. She explained that there is enough funding in this year's budget, because she had planned for counties that are going through site visits this fall, to get trained in February. She noted that Ms. Brock is proof that you can get trained in February and go through a site visit in the fall. In July, all health departments will have access to the system and then, as previously noted, we will use the August Workshop to hold training on how to use the system. We will also have archived webinars and YouTube videos that can be used at any time.

Administrator Belflower Thomas noted that Ms. Brock mentioned how she put in evidence for the site visit. The part that she mentioned about not using all of the functionality is that the portal is a performance management system. So, when Ms. Rife talked about the CATT tool, which is a fabulous tool, the problem with that is that every time there is a change to the HDSAI Interpretation Document, she has to update it. This system will serve as that tracking for a health department. In the new system, staff member users can be assigned to activities, they can be assigned deadlines, notifications can be sent to team members, and reports can be run to see which team members are late in submitting evidence. She explained that you can run a report at any time to see where you are. So, it provides a way for health departments to do quality improvement and to work real time during the four years of their cycle.

Update on Data Related to Agency Evidence Preparation

Administrator Belflower Thomas noted that during a previous meeting a concern was raised about a health department that was Reaccredited with Honors but really had poor preparation prior to

the Site Visit. The Board had requested that program staff collect data on that issue and that she would like Ms. Rhew to provide an overview.

Ms. Rhew explained that an evaluation was sent to each Site Visitor after each site visit asking them about preparation of the flash drive, preparation of the health department for the site visit and if there were any activities, they thought it would help to have more clarification. In terms of information about the flash drive, she reported that most of the Site Visitors reported that the flash drives were 51-75% or 76-100% complete. Again, the flash drive is what includes the evidence that is submitted ahead of time for the site visit that the Site Visitors have to review evidence. Administrator Belflower Thomas noted that we will not continue to collect this information because we are moving to the portal next year and the process will be different.

Update on Board Seat Vacancies

Administrator Belflower Thomas provided an update on the Board seat vacancies. She noted that with Chris Hoke's retirement, he will no longer be on the Board and Virginia Niehaus has taken Chris's role at the Division and she will be coming on to the Board. Ann Holton will rotate off the Board and the NCACC has nominated Jackie Newton from Pender County to take her place. Pender's Board of County Commissioners has assigned duties of the Board of Health. Administrator Belflower Thomas noted that she specifically requested someone from a county where the Commissioners were the Board of Health because she thinks that we need that perspective on the Board.

She explained that Board member Dr. Bill Sollecito will rotate off the Board and that Dr. Anna Schenck has been nominated to take his place. Chair Blackburn will be coming off the Board and Jim Tillman from the Carteret County Human Services Board has been nominated and Board member Bob Byrd will also be rotating off the Board and the nomination for his replacement is pending.

Administrator Belflower Thomas shared that she brought cake for lunch, to celebrate the fact the last health department was awarded Reaccreditation status last May, so all health departments have been through the reaccreditation cycle at least once. So, now in North Carolina all health departments have been Accredited as well as Reaccredited at least once. We celebrated with the AACs at the Annual Workshop and we also wanted to celebrate with all of you.

Recognition of Outgoing Board Members

Administrator Belflower Thomas noted that we do want to recognize our outgoing board members and we do have plaques for them.

Board member Bill Sollecito thanked everyone for their efforts. He stated that he has learned more about public health by being a member of this Board than in any course that he has ever taken. He noted that it is really inspiring to hear the stories and to get to know the people.

Board member Ann Holton shared that it has been a real educational process for her as a Commissioner and to hear about the other departments across the state. She has enjoyed serving on the Board. She said that she would not seek re-election and will enjoy her private life now. She shared that this is her last official meeting on any board except for her County Commissioners meeting next week.

Board member Bob Byrd stated that this has been very enlightening for him and that he has learned a lot by serving on this Board. He thanked the Board for the opportunity.

Chair Dobbins thanked everyone for their service, because, as he noted, there has got to be sacrifice somewhere for them to be here to do this. The full Board, the subcommittee meetings, it is a time commitment. So, he thanked them for being willing to serve and for also using it as a learning experience.

Board member Hughes added that being an officer in the National Association of Local Boards of Health, when you have seen one state deliver its public health, you have seen one state. Like our state, all the counties are different.

Chair Dobbins adjourned the meeting.

Next Meeting Date

May 10, 2019
10 a.m.—2:30 p.m.
Durham County Human Services Complex
Conference Room A
414 E. Main St.
Durham, N.C.