



Washtenaw County Board of Health

Minutes

September 24, 2021, 9:00 AM – 11:00 AM
555 Towner St., Room 2102B, Ypsilanti, MI 48198
Zoom Meeting

Present: James Carty, Gina Dahlem, Leon Golson, Neel Hajra, Justin Hodge, Carrie Rheingans, Katie Scott, Kathleen Stroud, Morghan Williams Boydston
Absent: Elisabeth Vanderpool
Staff: Jimena Loveluck, Kristen Schweighoefer, Ruth Kraut, Adam Paberzs, Hannah Lane, Susan Ringler-Cerniglia, Russell O'Brien
Guests: Maria Militzer, Micara (SP) Hieber, Ruth Atzinger, Crystal Campbell, Don Barwig, Kate Lynn Barwig, Danielle Hitt, Amelia Woods

1. Call to Order

Justin Hodge called the meeting to order at 9:03 AM.

Roll-call check-in.

2. Public Comment

Micara Hieber asked the board to keep in mind individual personal rights to bodies when voting and discussing policies that affect the Washtenaw County population. She said there is a quiet population that don't want forced vaccination and want to have a choice about masks for kids.

Ruth Atzinger expressed frustration about the choice of masking kids at school being taken away from parents. She asked the board to put the decision back into the hands of the parents because they know their kids best.

3. Board Member Response to Public Comment

Carrie Rheingans responded that the duty of public health is to think about a whole population, including vulnerable populations, such as immunocompromised kids that need to be protected by the population around them. We have seen that masks are effective at reducing the spread of the virus because they block the droplets that carry the virus. Studies in Michigan have shown that schools with universal masking have much lower rates of infection.

James Carty said that the mandate of the Board of Health (BOH) is to advise the Health Department (HD), and the mandate of the HD is to protect the citizenry. There are times the HD must take actions that are for the good of the population, although other people disagree with them. James shared a personal story about a friend with a young baby that just contracted COVID-19.

4. Approval of Agenda (Action)

*Motion by J. Carty, seconded by C. Rheingans, to approve the agenda.
Motion approved unanimously with a roll-call vote.*

5. Approval of August 27, 2021 Meeting Minutes (Action)

*Motion by N. Hajra, seconded by J. Carty, to approve the minutes of the August 27, 2021 meeting.
Motion approved unanimously with a roll-call vote.*



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6. Executive Committee Report from August 19, 2021

Board members received the Executive Committee minutes.
No discussion about the report.

7. Community Voices and Health for All Report

Maria Militzer shared that Community Voices members continue to support county residents with all the resources they have, including housing and COVID-19 related information. They are waiting to see if more community-based clinics will be made available for those that can't make it to the HD building for vaccines and testing. Maria stressed the importance of making more information available related to where community members, especially kids, can go to get a COVID-19 test.

Carrie Rheingans asked Maria if she has any suggestions for the BOH to be able to share information. Maria said it would be easier if the HD could put together infographics in different languages that could be shared through social media. There could be barriers asking people to go to the HD website. Navigating the process of getting an appointment for vaccine and testing is challenging for people that are not English proficient. Many of the places only have English speakers answering phones or the system to schedule is only in English. Another suggestion is for additional, non-business hours be made available for people that can't make it during regular business hours.

8. Maternal Infant Health Program and Children's Special Health Care Services – Kristina Katka, Supervisor

Christina Katka gave an overview of the two programs she supervises for the HD, Maternal Infant Health Program (MIHP) and Children's Special Health Care Services (CSHCS). MIHP is the largest evidence-based home visiting program in Michigan. It is a unique multi discipline model among the home visiting world because clients get connected with multiple professionals including a nurse, social worker, dietitian, and international board-certified lactation consultant. Clients must qualify for Medicaid to be part of the program and it is available for pregnant women and kids up to 18 months. Pregnant women receive up to 9 visits and infants receive up to 18 visits divided between all disciplines.

CSHCS functions more like a safety net or an insurance program. It is driven by diagnosis and is not income based. The HD has 2 full time nurses, a full-time social worker, community health worker (CHW), and admin reps. There are about 1300 kids in Washtenaw County enrolled in the program. The goal of the program is to be advocates for the families and help navigate their new diagnosis so they can focus on their child's health.

The last 18 months have been a bit of a challenge for both programs. MIHP had to transition more to a telehealth model since home visits were not happening. Food and diaper deliveries were happening with the help of Food Gatherers and other partners in the community. Nurses are helping to connect kids with their specialty appointments for CSHCS.

MIHP will be participating in a pilot where they will be able to offer enhanced services and additional visits to families. They will be able to bill for some non face-to-face time including calling landlords, calling doctors, and connecting clients with resources.

CSHCS has an opportunity to receive funding from Michigan Department of Health and Human Services (MDHHS) for increased vaccination for kids on the program. They are looking at ways to reach out to the families on the program including taking the RV to certain events.



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9. Board of Health Openings and By-Laws

Justin Hodge discussed the process for by-law changes. Board members will discuss changes today, the Executive Committee will look at the feedback and come up with proposals, board members will vote on the proposals, by-law changes will go to the Board of Commissioners (BOC) for final approval. The Executive Committee looked at different by-laws for different boards of health in Michigan and liked the Ingham County example. Current by-laws state that each board seat must be representing a different sector in the community. Ingham County makes it much more general and states that no more than 50% of members will be from the same sector. Neel Hajra said he doesn't think there needs to be a philanthropy slot and that broadening eligibility will create more community participation.

Justin mentioned an item that Carrie Rheingans brought up through email, board terms. He said most other boards and commissions do not have term limits, so putting term limits on BOH members would be an outlier and raise some discussion among the BOC. Something needs to be added about resignation and removal of board members. Justin discussed the idea of representation from Community Voices and Health for All. He doesn't think it would work out and it would not get BOC approval because it limits the options they can choose from. There was discussion about increasing the number of community spots or adapting the Ingham County model with less specificity.

Carrie Rheingans said she is wondering if there is a way to be more explicit. The BOC wants to use the Opportunity Index in decision making more so that could be a consideration of the BOC when appointing people and being explicit so they aren't exclusive. Neel Hajra agreed and said it is a good idea to use the Opportunity Index when appointing people to these different bodies.

Neel Hajra advocated for the idea of term limits. He said he thinks it is a healthy practice and has never seen a good case made for not having term limits. Morghan Williams Boydston said she believes in board term limits because it opens up diversity, difference of thought, and new perspectives. If you don't have a system in place to switch who gets the power and privilege, you are in fact creating systemic oppression. Kathleen Stroud said she strongly opposes any attempt to put term limits on the BOH. James Carty said he thinks a move to the Ingham County model would be a good move. Eliminating representative slots and opening up membership to anyone makes sense and he is in favor of term limits.

Gina Dahlem said she is in favor of having more of a broad eligibility qualification for the membership of the BOH like the Ingham County model. She pointed out that they do provide good general guidelines about percentages of sectors represented. Gina is in favor of term limits so that the county can have fresh perspectives and new ideas.

Leon Golson said he agreed with Gina's comments. He thinks it would behoove the county to make sure as many people as possible are represented at the table. Leon is also in favor of term limits.

Carrie Rheingans stated she wants to make sure we are explicitly adding space for people who have been excluded or are currently excluded.

Justin Hodge summarized the boards discussion into interest in looking at broadening the people that can be appointed to the BOH and trying to use the Opportunity Index to make sure the board is getting representative voices from across the county.



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10. BOC Liaison Report

Katie Scott shared the BOC approved the first round of American Rescue Plan Act (ARPA) funding, which includes childhood savings accounts and broadband services across the county. The HD FY22 budget was approved. A resolution was passed supporting the HD director.

11. Old Business

- **WCHD FY22 Budget at BOC**

Jimena Loveluck shared that the Board of Commissioners (BOC) approved the FY21 budget adjustment and the FY22 budget at their September meetings. The BOC also passed a resolution supporting the independent decision making of health officers across Michigan recognizing the public health authority given to health officers through the Michigan Public Health Code.

- **COVID-19 Updates**

The HD continues to focus on vaccinations. Booster doses for the Pfizer vaccine were approved for people with immunocompromised conditions a few weeks ago and those are being administered. Booster doses were recently approved for everyone 65 and older. The HD is waiting on the final guidance so that they can start implementing plans for administering the additional doses. The focus will be on ensuring equitable access to booster doses and continuing to use data to help reach areas with lower vaccination rates. A drive-thru clinic will be set up in the HD parking lot, community clinics with language services and non-business hours will be scheduled, and nurse on the run will go back to individuals' homes to provide booster doses.

Jimena shared that schools are receiving test kits through the State and the HD works regularly with schools that are implementing testing, to ensure that they have a testing process. The HD wants to offer both testing and vaccinations at community clinics in the fall.

Categories for children have been added to the two-week dashboard on the HD website. Cases are broken down for children ages 5-11 and 12-17. Carrie Rheingans mentioned a University of Michigan study that found parents' number one response to where they want to get their kids vaccinated, was at their doctor's office. She asked if the HD could work with doctors' offices to vaccinate 5-11-year-olds when it becomes available. Jane Nickert replied there are several strategies being considered for vaccinating younger kids. The HD has been working closely with pediatric doctors' offices already because they are vaccinating 12-17-year-olds. Going to the schools, with parents present, and drive-thru clinics are also part of the strategy.

12. New Business

- **Sale of Menthol Products**

Jimena Loveluck reminded board members about a meeting scheduled to discuss the sale of menthol products. The HD has the opportunity to work with the State and receive funding to do advocacy and policy work.

- **CDC Public Health Associate Program**

Washtenaw County HD has been selected as a host for the CDC Public Health Associate Program. The new associate will start in October and will be focusing on supporting environmental health work including PFAS, Gelman plume, and public health impacts of climate change.



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- **Kathleen Stroud**

Kathleen Stroud requested that the BOC add a 14th whereas to the recently passed resolution. "Whereas the Washtenaw County Board of Health recommends face coverings in schools to limit the exposure of illness" Justin Hodge will have the necessary discussion to see if the BOC can make the addition.

- **Justin Hodge**

Justin Hodge shared that he was appointed by the National Association of Counties to their Health Steering Committee. That looks at promoting health related change at the federal level and increasing how the federal government interacts and supports the work of local governments. More to come.

- **Jimena Loveluck**

Jimena Loveluck shared that she was voted in as president-elect of the Michigan Association of Local Public Health (MALPH). She will have 1 year in that position starting in October, before becoming president for 1 year, and then she will spend a 3rd year as past president.

13. Adjournment

Motion by N. Hajra, seconded by K. Stroud, to adjourn the meeting.

Motion approved unanimously.

Meeting adjourned at 10:59 AM.

Minutes taken by Russell O'Brien

