BOARD OF HEALTH MEETING  
May 17, 2016

Staff scheduling: At the end of this month we are following more core hours. Summer will be easier as the core hours are defined as 8-4. Winter hours are 9-5 and the staffs view these hours as not ideal. Public Health Director optimistic all staff can work together. A few months ago, after meeting with all staff a voluntary sign-up sheet to rotate schedules to provide proper coverage during winter hours was created, it worked out well. Supervisors are required to follow the same regulations as the staff.

Comp time: Public Health Director took a moment to show a comparison of comp time accruals from last year 01/01/2015-05/17/2016
Deb 2015: 60.75
Deb 2016: 10.00
Laurie 2015: 108
Laurie 2016: 50.50
168.75 vs 60
Note: Now all comp time exceeding 15 minutes requires Public Health Director Preapproval.

Rabies Vaccination Clinics: 2016 Clinics so far compared to 2015 numbers
Public Health #1 80.36% Inc Public Health #1 56, 101
Parishville 21.19% Inc Parishville 151, 183
Lisbon 103.9% Inc Lisbon 77, 157
Public Health #2 28.35% Inc Public Health #2 127, 163
Massena 39.56% Inc Massena 182, 254
Star Lake 55.13% Inc Star Lake 78, 121
Macomb -46.67% Macomb 45, 24

1003 animals vaccinated to date

Macomb did not reply in time to put on Public Health Department’s advertisements and also did not follow our advice that due to the restructuring the date they wanted their clinic would result in poor turnout. Discussion about the health department working with media to provide information, in return were able to advertise clinics during the month of May for free. Public health Director praised a staff member for doing a nice job.

Rabies Post exposure with hospitals: Public Health has a meeting planned with Canton Potsdam this Thursday. At least one of their staff members seems reserved. We will offer training and guidance to ensure a warm handoff. Claxton Hepburn was sent a letter informing them since we have not received a signed MOA they would be unable to provide services. Dave Ferris called and informed the Public Health Director he was unaware and requested we send him a copy.
**Time and activity tracking:** State Aid requires health departments to record all time and activity that is associated with grants and any activity eligible for State Aid. We have developed a more coordinated approach. Standardized categories with definitions and are color coded. Each employee’s computer has been programmed to ensure consistency. Seems well received by staff and anticipate some modification on an as needed basis.

**Time off:** Guidance has been developed on approval of time. Supervisors will no longer be burdened with constantly approving requests for time off. If the individual has the time available whether it is personal or vacation and minimum staffing levels exist, time is approved as long as it follows proper notification. This is toward an effort of reducing the amount of time wasted by supervisors that others could be completing.

**Discussion of preschool transportation contract:** Public Health has several options that include sending out to bid, holding them to the contract for two more years, and possibly see what modifications we can make to the current contract. The County Administrator, County Attorney and Director of Government Services are all in communication with the Public Health Director.

**Discussion about organizational design:** Public health director plans to change and does not believe in the current bureaucratic design. The process of purchases and time off approval has already been changed. He anticipates to discuss and next All Staff meeting. This redesign will redefine the role of supervisors and directors. A discussion took place about the Public Health Director’s expectation of supervisors and directors.

**Discussion about opioid and heroin:** Public health plans to put more staff time into the topic. Discussion about prescription takes backs, prescription drop boxes, needles found in the community, prescriptions of people when the die. The question of what is Public Health’s role with this topic was brought up and a discussion took place.

**Discussion about Functional Needs:** Public Health Director does not believe in current design. Plans to cancel current service and find alternative method. Emergency preparedness coordinator has been doing all the work under this topic and is doing well.

**Task List:** A Task List database has been incorporated into the department. Starting off slow but believe it will help with transparency and accountability. The Public Health Director is very positive about the possibilities.

**Tire Take Back:** Staff attended four events over 400 informational packets were distributed. It was a great opportunity to provide outreach and education.

**Procedure when late or sick:** Procedure was changed. A discussion took place.