

**Minutes – Clinton County Board of Health
Public Meeting held
November 7th, 2019 – 7:30 a.m.
Clinton County Administration Building – Conference Room “B”
1900 N. 3rd St., Clinton**

<u>Board Members</u>	Dr. Mary Malcom	Present
	Dr. O. Daniel Osaro	Present
	Dr. Sheryl Ernst	Absent
	Jean Morgan, RN, BSN, MSED	Present
	Don Thiltgen	Present

Staff Present Shane McClintock, Director to the Board of Health
 Kelli Eggers, Administrative Assistant to the Board of Health

Others Present

Michele Cullen, Genesis VNA
Kristin Huisenga, CSAC
Cynthia Kaczinski, Hillcrest WIC
Jocelyn Meyer, Bridgeview
Kelly Herd, F2 Mobile Crisis
Joanne Hermiston, Womens Health Services
Nancy Burns, CCEMA
Jim Irwin, Board of Supervisors
Leslie Mussmann, ASAC

Malcom called the meeting to order at 7:30 a.m. Roll call showed members 4 present. It was **moved** by **Thiltgen**, seconded by **Osaro**, to **APPROVE** the September 12th, 2019 minutes as submitted. Motion carried 4-0.

AGENDA ITEM III – BOARD OF HEALTH

Malcom noted that **Dr. Sheryl Ernst** will be stepping down from the board. This leaves one seat opening as of 12/31/19. The board reviewed the application of **Chelsea Sullens** who is a physical therapist in DeWitt. **Thiltgen** stated she is also a member of the DeWitt Noon Lions. **Irwin** stated that one more application recently came in but that applicant is also willing to serve on several county boards. **Malcom** and **Thiltgen** expressed **Mrs. Sullens** would be a great fit for the board. A recommendation for **Chelsea Sullens** to be accepted onto the Board of Health was moved by **Thiltgen**, seconded by **Osaro**. Motion carried 4-0. A resolution must now be passed by the Board of Supervisors.

AGENDA ITEM IV – COMMITTEE REPORTS

A. Finance – No updates.

B. **Personnel** – No updates.

C. **Total Quality Management** – No updates.

AGENDA ITEM V – DEPARTMENT REPORTS

A. **Environmental Services- McClintock** informed the board that another complaint has come in from **Mike Kopp** of the Outback Subdivision. **McClintock** explained that **Mr. Kopp** was given two choices originally by the Planning & Zoning Commission. This approved ½ acre lots with septics and a community well. He did not want a community well so he has been coming in to the office trying to find different ways. He was given that option and then also a 2 acre minimum option that Planning & Zoning requires. He has been aware of this the entire time and is now stating the county has cost him money. He is very upset because he states he started the Advantex system because it was originally required through the Planning & Zoning Board but he never actually finished it. Two people came into the last board meeting for variances because they were under the two acre minimum. Because everyone else would be allowed to have individual septics and wells, the variances would also allow them to do individual septics and wells. Now the complaint from **Mr. Kopp** is that he got the Advantex system working without telling **McClintock** about it and that it has cost him \$30,000. He states those individuals should hook on to that system instead of their own septics and wells. This was how it should have been before when it was only ½ acre lots. **McClintock** states he and **Thomas Barnes** of Planning & Zoning have talked to the county attorney who suggests they craft a letter and explain this situation to **Mr. Kopp's** attorney. **Mr. Kopp** is the one who asked for the change. **Thiltgen** asked the time frame. **McClintock** states it began over five years ago, before he was hired. These were the two options given, and 4 years later he asked to do the 2 acres. This was approved January 2019. **Mr. Kopp** is also being sued by one of the residents that came in for the variance.

B. **Genesis VNA & Hospice**– Informational report submitted. **Cullen** noted that they have been very busy with flu clinics. Clinton County was finished up two weeks ago. The penetration rate for school clinics is about 30%. The Let's Live Healthy Initiative is regrouping. They will have a December meeting and continue with Walking School Bus and Donation Gardening initiatives. The 5-2-1-0 funding is helping with those programs. Emergency Preparedness is going to separate hospital and public health funding. Genesis VNA and the Board of Health will be writing for this funding. The person who was going to write for the area hospital funding has backed out. If they are not replaced, it would go back on the state to handle it. This year they are working on appointed dispensing. This is where community clinics would see how the practice would go with getting vaccine supplies from the state to the local region in the case of an epidemic such as H1N1. **Thiltgen** asked about a nurse that comes to the coalition. She has a new program that she started up called the MAT Clinic. **Cullen** stated yes, **Laura Norris**. She is with MercyOne.

- C. **Hillcrest Family Services/WIC**– **Kaczinski** said that one of their action plans is to increase participation so they will have a walk in clinic. This has been done in Davenport and it has been very successful. It started with one day a month, and is now two days a month. The second Tuesday of each month, they will host a walk in clinic, first come, first serve. It will be open at 8 with last sign in at 3:30 pm. Fliers have been made up and distributed. **Osaro** said this is a great move but you have to look at the volume. He said if you don't get the volume you expect, it could be because of population. Just because it works somewhere else, does not mean it will work here, but a great idea.
- D. **Early Childhood Iowa/DECAT**– Not in attendance.
- E. **Clinton Substance Abuse Council (GIC & CDC)**- **Huisenga** explained that they have a new coordinator for Gateway Impact Coalition, **Jordan Lillard**, and she was at the last board meeting. **Huisenga** said they do a lot of stuff coalition related at CSAC. The CDC is going through strategic planning as they will be applying next year's competitive for that coalition. The team is moving forward with the MAT Clinic and the DART Program in Clinton. They have recently seen a heroin overdose in the community and they are keeping an eye on it. The MAT Clinic is on Wednesday afternoons. Only 3 new patients are accepted each week. ASAC is doing a case management and Bridgeview is doing peer support. **Thiltgen** said **Ellen Gackle** interviewed him. The sheriff's office is no longer collecting unused medication. Thus, Wagner Pharmacy is the only local place for a drop off. **Morgan** stated that she heard this morning that Hyvee is now doing this. **Eggers** said she heard the same on the radio, it starts today. **Morgan** said they are also only giving out 7 days of opioid meds on prescriptions. **Osaro** stated Hyvee is just now catching up as Walgreens has done this for a few years.
- F. **Women's Health Services**– **Thiltgen** motioned to approve the 1st quarter rapid HIV claim and the 1st semester Teen Success claim, **Osaro** seconded. Motion carried 4-0. **Hermiston** said they have a new health educator. She has been quite busy in the schools with classroom education. The alternative high school has a program called Love Notes which is based on relationships and decision making. The Pregnant and Parenting Support Group was also started this week. They have been at parent cafes, coalition meetings, the DeWitt Autumn Fest, and Clinton Community College Resource Fair. Regarding the health educator, the students have already been asking when she is coming back. Response has been excellent with positive feedback such as children being able to have discussions with their parents regarding birth control and what they had learned. **Morgan** stated with the increase in heroin and meth, that those people should be HIV tested. **Huisenga** stated she believes they are being tested for HIV as well as Hepatitis C.
- G. **Area Substance Abuse Council (ASAC)/New Directions**- **Mussmann** stated they have a new prevention specialist, **Ellen Gackle**. She will do the Integrative Provider Network Program for Prevention. This means the behavioral health side of the IDPH is requiring an intensive strategic prevention program with all of the counties. They will be looking at alcohol, marijuana, prescription drugs, problem gambling, and tobacco. This will

include an extensive assessment and also creating a plan. Clinton is unique with all of the coalition activities happening. It would be great to have all these people gather around a table and work on this. Prevention is not just for youth. They will look at prenatal women through senior citizens. The first piece came out this month and will continue for 5 years. **Ellen Gackle** will take the lead on this. The clinical director, **Gabe Gluba** left last month. They are in search of a new director for the outpatient services. The applicant must hold a master's degree in a related field. ASAC is partnering with a company out of Des Moines to bring in medicated assistive treatment into the outpatient office. This is not to be competitive to MercyOne's program. Theirs is weekly, and some may need to be more intense and this would be a good alternative. **Thiltgen** questioned where **Gabe** went. **Mussmann** said he went to the Mississippi River AEA to be a counselor for the schools.

H. Bridgeview Community Mental Health Center– Newsletter submitted. **Meyer** said the 1st quarter of this fiscal year shows 1573 adults and 293 youth served. This number is slightly down from last year. The psychiatric nurse practitioner for youth joined this summer. They are there one day per week so she is very booked. MercyOne has the MAT Clinic which Bridgeview is a part of. They are involved with peer support. The peer support specialist keeps a low profile at the clinic. He can sit amongst the patients in the waiting area. They have had excellent feedback on this support. One individual shared with him that she now has money to buy new clothes because she isn't spending the money on drugs. Another individual didn't have a ride to get their prescription filled and he was able to drive that person to the hospital pharmacy to take care of the matter. Since January, Bridgeview has been a part of 18 community events and presentations. They have also done events in Jackson County. They have been busy with screenings as well. The new office has been going very well. They hope that it will be completed in early 2020. **Malcom** noted that Iowa Suicides report for 2017 has come out. She also provided a Clinton County Suicides report for 2017 as well. The 2019 information is not out yet. They run that far behind because it takes that long to get the statistics and go over them. **Malcom** stated one very interesting note was that in 2017, 1 drug overdose occurred and it was due to non-opioid prescription medication. With accidental deaths, more are being seen due to methamphetamines than that of opioids.

I. Center for Alcohol & Drug Services, Inc. (CADS)- Not in attendance.

J. Emergency Management– Informational report submitted. **Malcom** welcomed everyone to take an email print out regarding a webinar coming up. They are professionally done webinars. **Burns** stated they are still quite busy with Run, Hide, Fight trainings. Clinton schools have asked for it at each school. Two schools remain. Clinton Community College has asked them to come in for staff that has been unable to do the training. They also did two more presentations at Nestle Purina. To date in 2019, they have trained 877 people in Clinton, compared to 350 in 2017. They met with the Red Cross and are updating shelter agreements in the county. This requires meeting with different churches and community centers throughout the county. Radiological emergency training continues. The FEMA evaluated medical services exercise was in

DeWitt. If something were to happen at Exelon and there was a release of radioactive material that came into the county, a patient who was possibly contaminated would be taken to Genesis DeWitt. FEMA comes in every few years and evaluates a drill on this. There were no major comments at that time; however it takes 60-90 days to get the full results. **Burns** states they have also been involved with planning for possible levy breaches with the Corps of Engineers. This includes evacuation planning and where the water would go in different time frames. It appears that we may have spring flooding again next year as we did this year. They will be meeting later today at the Fall Emergency Managers Workshop at the National Weather Service and look for potential weather updates. New warnings that will be used this winter will be gone over soon. A new product called the Snow Squall will be more specific to inform of heavy, blinding snow falls. The two drones are the big project they are working on. Fly Motion came to do 3 full days of training including night training. There are 6 pilots with 2 being police officers, 2 fire fighters, **Dan Howard**, and a CERT volunteer. 2 of those have FAA licenses. The others are working toward theirs. Part of the policy is they must have the FAA license to operate drones. Once those 6 have been completed, they will reach out for others who may be interested. A night exercise was held for practice on searching for a victim. The technology has been installed in their new area in the building. The offices have a lot of work yet to do. They hope to be up and running the first part of the year. **Thiltgen** noted that **Chance Kness** is the proud father of a new baby boy and will be off on medical leave for a few weeks.

K. Community Health Care, Inc- Unable to attend.

L. EveryStep/MCAH- Unable to attend.

AGENDA ITEM VI – BOARD OF SUPERVISORS

Irwin said that a resolution was passed on Monday for no cell phone usage in the jail and courthouse. There was recently an issue with an individual having videotaped inmates having communications with family. The visiting cubicles are set up in the public area. On certain days adolescents are there. No video, tape recording, or electronic devices will be allowed. Some of the videos that individual took have been taken down off the internet. The county treasurer has announced her retirement as of March 30th, 2020. She is willing to work through the transition. Officially, they will not take any action until April 1st. They would have 40 days to find someone to fill in until the next election. It would cost \$35,000 to hold a special election to fill the position. 10% of the voters would have to sign a petition to ask for a special election. This would only even cover three months between the 90 days and the general election. On Monday, Muscatine voted to exit the Eastern Iowa Mental Health Region. **Irwin** said they are dealing with a lot of funding situations having cut 1.3 million out of the current budget to hopefully get through next September. More money will probably have to be cut for our region. This exit will short us about \$300,000. According to the 28E, they still have to pay the money. But this will most likely take legal action. **Thiltgen** noted that the county followed the state's requirements to spend the funds down. \$30.78 is

the per capita rate in our region. The funding was based on mental health related expenditures for our region from 2015. We all know this goes up each year. 9 million was spent in 2015. In 2018, it was 12.3 million for our region. By 2020, there was a resolution that the accounts had to be set at 20%. Thus, 1.3 million was spent down into grants to get those programs up and going which are mandated by the state. Now, the issue is that it seems the region did not do a good job budgeting out a few years in advance. As of June 2019, \$500,000 more than budgeted was spent. Spending is coming in faster for this fiscal year than what was budgeted. The expenditures in the state of Iowa in 2018 were 121.8 million dollars. 125 million are sitting in unspent balances. We are not one of those regions however. Now that we spent it down, there isn't room to grow a balance.

AGENDA ITEM VII – PUBLIC COMMENT

Kelly Herd introduced herself from the Mobile Crisis Outreach Program. She provided informational handouts. Foundation 2 is the agency that oversees this program. They have already been in other Iowa counties such as Linn, Bremer, and Buchanan and are now getting into eastern Iowa. There is a phone number that anyone can call if they feel they are in a crisis situation or can call on behalf of someone else. A counselor would ask questions and try to resolve the situation over phone or send a live counselor to the location if necessary. This is a point in time service where they build a relationship quickly with the individual, see where the issues are, deescalate, and come up with a plan. This can take an hour, or several. Each case is different. The plan may result in a suicide assessment or taking them to the ED. There are crisis homes if needed. Vera French is a crisis home in Davenport. Rhonda's House in DeWitt is another house for peer support. These are voluntary programs. Other times, they come up with a plan where the individual feels they will be safe. Anyone who presents a crisis will be asked to sign a release of information. This will be handed over to care coordinators in their county so they may continue services close to home. They are followed for 30 days unless they present crisis and then they are monitored again. **Burns** stated that local law enforcement officials have nothing but positive things to say about this program.

AGENDA ITEM VIII – OLD BUSINESS-

NONE

AGENDA ITEM IX – NEW BUSINESS-

NONE

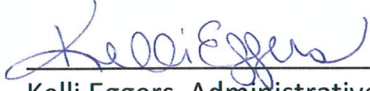
AGENDA ITEM X – NEXT MEETING DATE

January 9th, 2020 and March 5th, 2020 at 7:30 am at the Clinton County Administration Building, Conference Room "B".

AGENDA ITEM XI – ADJOURNMENT

Motion by Osaro, seconded by Thiltgen, to adjourn. Motion carried unanimously. Meeting was adjourned at 8:40 a.m.

Respectfully Submitted,



Kelli Eggers, Administrative Assistant to
the Board of Health

Approved _____



Dr. Malcom, Chairperson, Board of Health

Attachments can be viewed by contacting the Board of Health at the Clinton County Satellite offices.

Iowa Violent Death Reporting System Special Report on

Suicide in Iowa, 2017

The Iowa Violent Death Reporting System (IAVDRS) is a CDC-funded statewide surveillance system that collects information on deaths that occur in Iowa resulting from homicide, suicide, unintentional firearm deaths, legal intervention and deaths of undetermined intent. IAVDRS is a multi-source data system from death certificates, medical examiner and law enforcement reports. The goal of this effort is to aid researchers, policymakers, and community interest groups in the development of public health prevention strategies to reduce violent deaths. Iowa began collecting data in 2015. This report is based on data from all 99 counties in Iowa. In 2017, there were 628 violent deaths that occurred in Iowa, of which 602 were residents of Iowa, and 460 of the violent deaths were classified as suicide. This report is a summary of Iowa resident suicide deaths.

TYPES OF VIOLENT DEATHS AMONG IOWA RESIDENTS

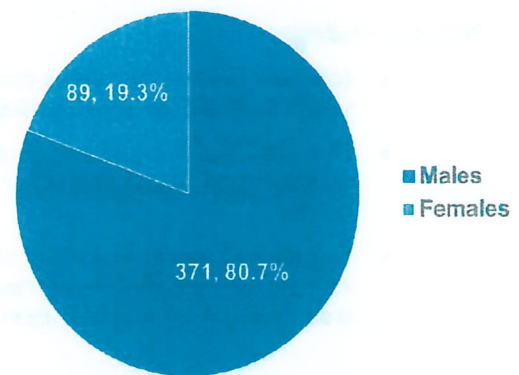
- In 2017, the majority of violent deaths in Iowa were classified as suicide, 76.4%.
- The remaining deaths from violence in Iowa were attributed to homicide (16.6%), undetermined (6.2%), and legal intervention (0.8%).

SUICIDE IN IOWA

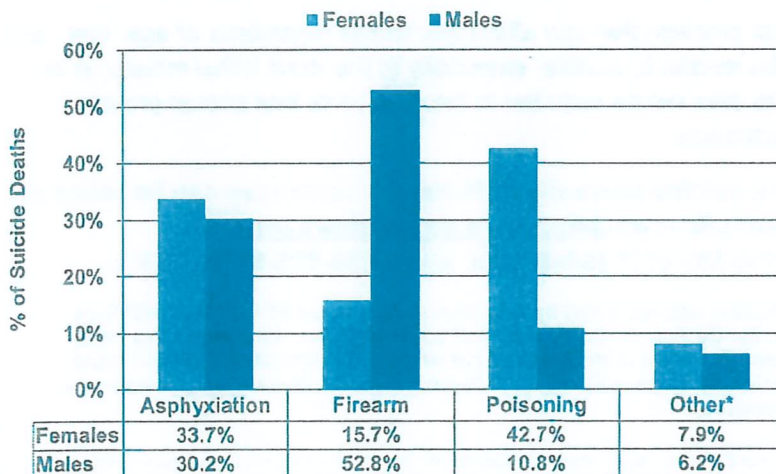
- State Rates.** Iowa's suicide rate in 2017 was 14.62/100,000, a 1.8% increase from 2016.
- State/U.S. Comparison.** The suicide rate in Iowa was slightly higher than the national average of 14.48/100,000.
- Sex.** Males accounted for 80.7% of suicide victims and females accounted for 19.3% of suicide victims in 2017.

A Look at Overall Suicides For the State of Iowa, 2017

Total Suicides by Sex, 2017



Suicide Method by Sex, 2017



SUICIDE METHODS

- Firearm use was the manner of death in 45.7% of suicides, followed by asphyxiation (30.9%), and poisoning (17.0%).
- Poisoning (42.7%) and asphyxiation (33.7%) were the most common manners used by females and firearm (52.8%) and asphyxiation (30.2%) were the most common for males.

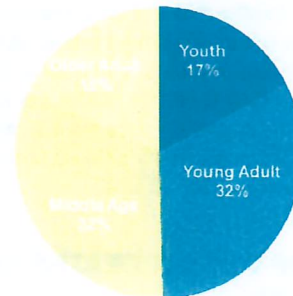
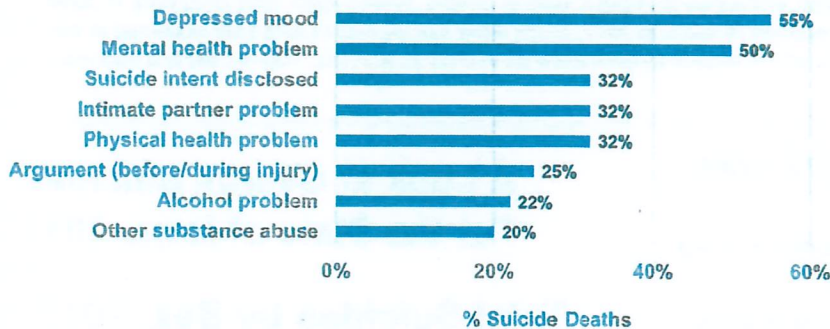
* Other includes: drowning, fall, fire/burn, motor vehicle, other transport vehicle (e.g., train, plane, boat), non-powder gun, intentional neglect, and sharp instrument

FACTORS CONTRIBUTING TO SUICIDE DEATHS

In 97% of Iowa's resident deaths by suicide, contributing circumstances surrounding the suicide deaths were documented in the records (N=445) by the medical examiner and/or law enforcement.

The age groups with the largest proportion of suicide deaths were people aged 25-44 and 45-64 (32% of the deaths in each group). Followed by older adults (65 years or older, 18%) and youth (ages 10-24) which comprised 17% of suicide deaths.

Suicide Deaths by Life Stage, 2017



Notable Findings:

- ◆ Intimate partner problems contributed to more circumstances among young adults, followed by youth and middle-aged adults than to those in the older adult group.
- ◆ Physical health problems as a circumstance of suicide increased with age, particularly in the middle-aged (42%) and older adults (68%), compared to only 15% of young adults and 5% of youth.
- ◆ Depressed mood was most common in older adults yet history of mental health treatment and current mental health treatment was least common in this age group, and suicide thought history was nearly the most common in older adults.

The data reveals that the majority of violent deaths in Iowa are classified as suicide and four out of five suicides are males. The leading contributing factors for those at risk for suicide are depressed mood, existence of a mental health problem and history of treatment and suicidal thoughts, having an intimate partner problem, a history of suicidal ideation, and physical health problems.

These data show that suicide is a complex problem that can affect any Iowan regardless of age, sex, race or any other demographics. Restricting the means to suicide, especially to the most lethal means, is an effective suicide prevention strategy. More data will be included in future reports that should provide additional insight for suicide prevention initiatives.



The University of Iowa



More information on suicide prevention efforts and resources can be found at **Your Life Iowa** (<http://www.yourlifeiowa.org>), 1-855-581-8111 (telephone) and 1-855-895-8398 (TEXT).

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References

National Suicide Rates – Centers for Disease Control & Prevention, National Center for Injury Prevention and Control. <https://www.cdc.gov/injury/wisqars/index.html> Data updated January 18, 2019. Accessed **February 22, 2019**.

State Rates – Iowa VDRS (for numbers of deaths). Bureau of Census (for population estimates).



CLINTON COUNTY MEDICAL EXAMINER'S OFFICE

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MEDICAL EXAMINER

SUICIDE IN CLINTON COUNTY (IOWA), 2017

Total number of deaths in Clinton County in 2017 is more than 500.

Total number of violent deaths (homicide, suicide, unintentional firearm deaths, legal intervention and deaths of undetermined intent) is 15.

Types of Violent Deaths in Clinton County

In 2017, the majority of violent deaths in Clinton County were classified as suicide (67%).

The remainder were attributed to homicide (27%), and undetermined (7%).

Total Suicides by Sex, 2017

Males 90%

Females 10%

Suicide Methods

Asphyxiation was the manner of death in 50% of suicides, followed by firearms (30%), poisoning (10%) and other (10%).

The poisoning death involved non-opioid prescription medications.

Suicide Deaths by Life Stage, 2017

Youth (ages 10-24 years) 20%

Young Adults (25-44) 50%

Middle Age (45-64) 20%

Older Adults (65 years or older) 10%

There were also 11 accidental deaths in Clinton County in 2017.

Multi-drug overdose was the cause of 36% of the accidental deaths. 25% of these deaths involved opioids. 75% of these deaths involved methamphetamine.

The remainder of these deaths were due to falls (18%), motor vehicles (27%) and blunt trauma (18%).