



# MEETING MINUTES

Board of Health  
August 12, 2019

TOPIC	DISCUSSION
Call to Order	<ul style="list-style-type: none"> <li>Kacy Allen-Bryant called the meeting to order at 5:51 p.m.</li> </ul>
Attendance	<p><b>PRESENT:</b> Kacy Allen-Bryant, Mr. Cornett, Dr. Dossett, Mr. Friesen, Dr. Jackson, Dr. Majmundar, Ms. Roberts Pierre.</p> <p><b>OTHERS PRESENT:</b> Dr. Humbaugh, Health Department Staff, LFCHD Council.</p> <p><b>EXCUSED ABSENCES:</b> Commissioner Ford, Dr. Jasinski, Dr. Zimmerman.</p>
Approval of the July 8, 2019 Minutes	<ul style="list-style-type: none"> <li>Dr. Majmundar made a motion to approve the July 8, 2019 minutes. Dr. Jackson seconded the motion. The motion passed.</li> </ul>
Naloxone Training and the Needle Exchange Program (NEP)	<ul style="list-style-type: none"> <li>Lindsey Todd, Lexington-Fayette County Health Department (LFCHD) Clinic &amp; TB Team Leader, introduced Amy Baker, Substance Use Program Coordinator, Department of Social Services, and Scott Luallen, Overdose Prevention Coordinator, Lexington-Fayette Urban County Government (LFUCG).</li> <li>Amy Baker thanked Dr. Humbaugh and LFCHD for our partnership through the Needle Exchange Program (NEP). A. Baker said LFUCG was awarded a \$2 million, four-year federal grant that focused on strengthening overdose prevention infrastructure in Lexington. The goals of the grant include:               <ul style="list-style-type: none"> <li>Providing resources and training for first responders to carry and administer naloxone.</li> <li>Providing referrals to recovery, treatment, and harm reduction services.</li> <li>Developing a “Good Samaritan” campaign to encourage individuals to call 911 if they witness a suspected overdose.</li> <li>Establishing an Advisory Council. The council has been established, and LFCHD is a member.</li> </ul> </li> <li>Community naloxone training and distribution events have been held at the Hope Center, New Day Life Center, Lighthouse Ministries, Revive Treatment Program, Alano Club, Transylvania Public Safety, Lexington Probation and Parole, Shepherd’s House, Mountain Comp, and the Lexington Rescue Mission. Upcoming events are scheduled for the Token Club, Catholic Action Center, NAMI, GreenHouse 17, and VisitLex.</li> <li>A. Baker shared information on the digital media, posters, billboards, and public transportation notices that will be used to promote the “Good Samaritan” campaign.</li> <li>Dr. Humbaugh thanked A. Baker and S. Luallen and said we are very grateful for our continued partnership as we address the opioid crisis.</li> <li>Chris Smith, Nurse Specialist, presented on recognizing and responding</li> </ul>

to an opioid overdose. The presentation included training on naloxone administration. All present who completed the necessary paperwork and training received a free naloxone kit, containing two doses of the drug.

- Narcan, generic naloxone, is a prescription medication that temporarily reverses the effects of opioids. The effects begin to wear off in 30 minutes. Effects wear off completely between 45 minutes and 3 hours of administration. The effects of opioids last longer, so a person may go back into overdose after the naloxone effect diminishes.
- Naloxone is not a controlled substance and has no potential for misuse. It is safe for everyone, including pregnant women and children. Under state law, nurses working for a health department can dispense naloxone upon completion of training and paperwork to develop a patient chart.
- Naloxone does not reverse overdoses caused by alcohol or drugs that are not opioids. Drugs that are opioids include Suboxone, Wildnil, Tylenol with Codeine, Tylenol #3, Fentanyl, Heroin, and Hydrocodone, Hydromorphone, Demerol, Methadone, Morphine, and Oxycodone.
  - If you do not know what caused the overdose, administer naloxone. If it is an opioid overdose, it will help. If it is not an opioid overdose, naloxone will not cause harm.
- When someone overdoses, their breathing may become shallow and slow, or may stop completely. A person who overdoses will be unable to wake up. Their skin may be pale, cool, and clammy. Blue or grey lips and fingernails are a late sign of overdose.
- Risk factors for overdose include taking opioids alone, previous overdose incidents, non-medical or recreational opioid use, and using high-dose, long-acting, or powerful opioids. Additional risk factors are starting Suboxone or methadone for addiction treatment, smoking and chronic medical conditions, mixing multiple drugs, and using opioids again after a period of not using them.
- Strategies to prevent overdose include not taking opioids when alone, starting with the lowest dose, avoiding alcohol and other drugs, taking prescriptions as directed, and informing healthcare providers of prescription and non-prescription drug use.
- When you suspect someone may have overdosed:
  - Shake them and shout their name, seeking a response.
  - Shout NARCAN!
  - Rub their chest with the knuckles of your fist.
  - If they do not respond, administer naloxone immediately.
  - If someone else is nearby, have them call 911 immediately.
- C. Smith explained how to administer naloxone:
  - Position the person on their back, if possible.
  - Remove naloxone from packaging.
  - Tilt the person's head back gently and insert the tip of the nozzle in to one nostril.
  - Press the plunger firmly until it clicks. This releases the dose.
  - Remove the nozzle from the nostril.

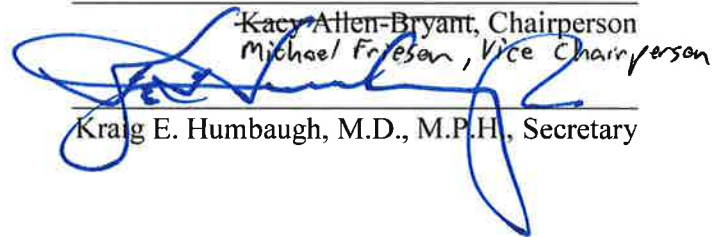
	<ul style="list-style-type: none"> <li>○ Place the person in recovery position (on their side, lower arm below their head, to cradle; upper leg bent with the knee in front of the other leg for balance and the foot of the upper leg behind the calf of the lower leg).</li> <li>○ Call 911 immediately.</li> <li>○ If there is no response after the first dose, repeat this process every two to three minutes, alternating nostrils.</li> </ul> <ul style="list-style-type: none"> <li>● After administering naloxone and calling 911, stay with the person and on the phone with 911 until EMS arrives.</li> <li>● Once awake, the person will likely go through opioid withdrawal. They may want to use an opioid again. Remind them that the effects of opioids last longer than those of naloxone and that EMS is on the way.</li> <li>● Store naloxone in the original package at room temperature. Protect it from direct sunlight. Do not allow the package to freeze or be exposed to high temperatures. Do not store naloxone in the glove compartment of a vehicle.</li> <li>● Replace the naloxone kit before the expiration date. Please note it is not unsafe to use expired or improperly stored naloxone; however, it may lose some of its effectiveness.</li> <li>● Replacement kits can be obtained during NEP operation at no charge. Additional training is not required to obtain a refill.</li> </ul>
Commissioner's Report	<ul style="list-style-type: none"> <li>● Dr. Humbaugh introduced Dr. Bhargava, a preventive medicine resident who is on his first rotation at LFCHD.</li> <li>● Dr. Howard, Department for Public Health Commissioner, has resigned to accept a White House fellowship.</li> <li>● House Bill 1 was signed into law.</li> <li>● Four staff members have relocated from South to our North location. We plan to have all South staff relocated by the end of September.</li> <li>● The Information Technology (IT) branch is poised to migrate all LFCHD email addresses to the lfchd.org domain.</li> <li>● We completed the contract for the amendment to the school health services contract. The amendment added 1.5 FTE nurse positions.</li> <li>● We have applied for a \$150 thousand grant that would provide funding for syringes and supplies for the NEP, if awarded.</li> <li>● We continue to see record numbers of participants in the NEP, exceeding 1,000 monthly. There have been almost 5,000 unique clients.</li> <li>● There was one case of hepatitis A in the last month. Dr. Humbaugh participated as a panelist for the viral hepatitis conference in July.</li> <li>● There have been no human cases of mosquito-borne illness so far this season. We have done spraying in areas in which there have been high numbers of mosquitos detected in our traps.</li> <li>● The free flu shot clinic will be held October 10. We are confirming the location, and will have additional information soon.</li> <li>● The farmers' market is going well and has operated at both the North and South locations. WIC staff have attended other farmers' markets in the community.</li> <li>● School Health nurses are back and are preparing for the new school year.</li> <li>● The next <i>All-Staff</i> meeting will be held September 11.</li> </ul>

Committee reports	<p><i>Finance Committee</i></p> <ul style="list-style-type: none"> <li>• C. Kay presented the year-end financials.</li> <li>• The agency had a surplus of \$3.1 million for fiscal year 2019. Year-to-date revenues stand at 112% of plan, while expenses are at 97%.</li> <li>• Tax revenues have exceeded the annual budget by over \$825,000.</li> <li>• Current cash accounts at year-end are \$17.2 million, up almost \$2 million from this time last year.</li> <li>• House Bill 1 was passed during the recent legislative special session. The legislation will keep the health department's KERS contribution rate at 49.47% for this fiscal year. In light of this, the health department's budget has increased by \$2.08 million for a total annual budget of \$2.15 million. We resubmitted the budget to state with the resulting changes. We also have cost savings measures in place.</li> <li>• We are looking at potential compensation incentives for staff. We have presented tentative plans to the Executive and Finance Committees and will keep the full board informed. K. Allen-Bryant said she hopes we will be able to do something for the staff, who are very deserving.</li> </ul> <p><i>Executive Committee</i></p> <ul style="list-style-type: none"> <li>• K. Allen-Bryant said the committee is reviewing applications for the at-large position on the Board of Health and will submit recommendations to the Mayor's Office.</li> </ul> <p><i>Marketing/Branding Committee</i></p> <ul style="list-style-type: none"> <li>• No report.</li> </ul> <p><i>Nominating/Bylaws Committee</i></p> <ul style="list-style-type: none"> <li>• No report.</li> </ul> <p><i>Program Outcomes/Evaluation Committee</i></p> <ul style="list-style-type: none"> <li>• No report.</li> </ul> <p><i>Policy/Protocol Committee</i></p> <ul style="list-style-type: none"> <li>• No report.</li> </ul>
Communications Report	<ul style="list-style-type: none"> <li>• Kevin Hall presented the Communications Division report.</li> <li>• Monthly media appearances in July focused on back-to-school immunizations, mosquitoes, Ebola virus, and breastfeeding.</li> <li>• Social media updates: <ul style="list-style-type: none"> <li>○ <i>Twitter</i>: Our top tweet was about strategies to stay cool in the summer heat. We posted 41 tweets and received 54,200 impressions. We had 359 profile visits, 22 mentions, and 10 new followers.</li> <li>○ <i>Facebook</i>: Our total reach was 16,422, with 656 page views and 3,448 post engagements. Nearly 7,000 people were reached with our post about a rabid bat found in Lexington. A post about mosquito control reached 2,301 people.</li> </ul> </li> <li>• Mosquito spraying was completed in sections of the 40505 and 40511 ZIP Code areas.</li> </ul>

	<ul style="list-style-type: none"> <li>• A rabid bat was found in the Winding DR/Willowood RD area of Lexington. LFCHD posted signs in the area to notify residents of the discovery.</li> <li>• In August, the farmers' market will continue to operate at both health department locations. August is National Breastfeeding Month. We are preparing for the Free Flu Shot Clinic, to be held on October 10.</li> <li>• Starting tomorrow, LexArts will facilitate an online poll to allow everyone a chance to vote on their favorite of the three finalists for the mural project. Comments will also be welcomed. The final selection will be made August 30. K. Allen-Bryant and Leah Mason will represent the Board of Health on the selection committee. Starting August 26, small mock-ups of the mural options will be on display in Administration on the third floor at 650 Newtown Pike.</li> </ul>
Open Comment	<ul style="list-style-type: none"> <li>• None presented.</li> </ul>
Adjournment	<ul style="list-style-type: none"> <li>• S. Roberts Pierre made a motion to adjourn. M. Friesen seconded the motion. The meeting adjourned at 7:16 p.m.</li> </ul>



Kacy Allen-Bryant, Chairperson  
Michael Friesen, Vice Chairperson



Krag E. Humbaugh, M.D., M.P.H., Secretary