



STORY COUNTY BOARD OF HEALTH

TENTATIVE AGENDA
TUESDAY, April 7, 2020
2:00 PM

Originating From Public Meeting Room - Story County Administration (900 6th Street) – Nevada, Iowa*

SPECIAL NOTE TO THE PUBLIC: Due to recommendations to limit gatherings to no more than ten (10) people in order to help slow the spread of the COVID-19 virus, public access to the meeting will be provided via conference call to listen to the meeting. Members of the public who would like to call in: **Dial 918-221-0224 Enter 2225929465#** when prompted for the access code **We ask that you mute your phone if possible. Audio recordings of all Board meetings will be posted on our website www.storycountyiowa.gov shortly after the meeting is concluded. You may access these recordings at a

1. CALL TO ORDER
2. APPROVAL OF AGENDA
3. APPROVAL OF MINUTES

Documents:

[MINUTES 020420.PDF](#)
[MINUTES 031620.PDF](#)
[MINUTES 032420.PDF](#)
[MINUTES 033020.PDF](#)

4. PUBLIC FORUM

This is the time for members of the public to offer comments concerning matters not scheduled to be heard before the Board of Health.

5. CONSENT AGENDA

All items listed under the consent agenda will be enacted by one motion. There will be no separate discussion of these items unless a request is made prior to the time the Board votes on the motion.

6. ADDITIONAL ITEMS

- 6.I. Discussion And Consideration Of Issuing A Press Release To The Citizens Of Story County Regarding Keeping Covid-19 Positive Cases Low

Documents:

[DRAFT PRESS RELEASE.PDF](#)

- 6.II. Discussion And Consideration Of Recommendation To Governor Reynolds To Issue A Shelter-In-Place Order
- 6.III. Discussion And Consideration Of Revisions To Public Health Covid-19 Medical Surge Plan - Les White

Documents:

[REVISED DRAFT MED SURGE PLAN .PDF](#)

- 6.IV. Discussion And Consideration Of COVID-19 Positive Individuals That Have No Home To Return To - Les White
- 6.V. Discussion And Consideration Of Responsibilities Related To A Medical Overflow Facility - Les White
- 6.VI. Discussion And Consideration Of Local Public Health Services FY21 Application - Les White

Documents:

[FY21 LPHS GRANT APPLICATION.PDF](#)

7. AGENCY AND DEPARTMENTAL REPORTS

- 7.I. Story County Public Health; Les White, Treasa Ferrari

Documents:

[PUBLIC HEALTH REPORT.PDF](#)
[CORRESPONDENCE FROM BUREAU OF PUBLIC HEALTH PERFORMANCE REGARDING HOME MAKER SERVICES.PDF](#)

- 7.II. YSS; Denise Denton

Documents:

[CORONAVIRUS ISOLATION IS TRIGGER FOR RELAPSE.PDF](#)

- 7.III. Story County Environmental Health; Margaret Jaynes

Documents:

[EH DEPT REPORT.PDF](#)

8. COMMENTS

Staff
Board

9. ADJOURNMENT

Story County strives to ensure that its programs and activities do not discriminate on the basis of race, color, national origin, sex, age or disability. Persons requiring assistance, auxiliary aids or services, or accommodation because of a disability may contact the county's ADA coordinator at (515)382-7204.



**STORY COUNTY
BOARD OF HEALTH**
STORY COUNTY ADMINISTRATION
900 6TH STREET
NEVADA, IOWA 50201

Minutes

AN AUDIO RECORDING OF THE FULL MEETING MAY BE FOUND IN THE ENVIRONMENTAL HEALTH DEPARTMENT, OR BY VISITING WWW.STORYCOUNTYIOWA.GOV

DATE: February 4, 2020

CALL TO ORDER: 2:00 p.m.

PLACE: Administration Building, 2nd Floor

Dr. John Paschen, Chair

*Mark Speck, Vice-Chair

Dr. John Kluge

Dr. Louisa Tabatabai

Dr. Molly Lee

Lisa Heddens (Ex-officio)

*Absent

STAFF PRESENT: Margaret Jaynes, Environmental Health Director; Cathy Bazylinski, Environmental Specialist; Matt Cory, Environmental Specialist, Stephanie Jones, Recording Secretary

OTHER PEOPLE PRESENT: Randy Mayer, Treasa Ferrari, Les White, Denise Denton, Vanessa Kowalski

1. CALL TO ORDER

Dr. John Paschen called the meeting to order at 2:00 p.m.

2. APPROVAL OF AGENDA MCU

Motion by Kluge, Second by Tabatabai MCU

3. APPROVAL OF DECEMBER 3, 2019 MINUTES

Motion by Lee, Second by Tabatabai MCU

4. APPROVAL OF CONSENT AGENDA

FY20 Grants To Counties Contract Effective July 1, 2019- June 30, 2020

MCU

5. PUBLIC FORUM

None

ADDITIONAL ITEMS:

Medical Cannabidiol In Iowa Presentation

Randy Mayer, Iowa Department of Public Health, presented a brief overview and provided information on how the medical cannabidiol program is working in Iowa. Information was provided on the components of the law, who a patient is, how to qualify, registration cards, qualifying debilitating medical conditions, health practitioner role, protections provided by law for providers, and dispensaries currently in operation.



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Community And Family Resources Presentation

Vanessa Kowalski, Prevention Specialist, provided information on services provided by Community and Family Resources and projects being worked on currently including drug free workplace training, Narcan training, evidence-based curriculums and prime for life education for school agers. Current projects being worked on include: Partnering with the Prevention Policy Coalition for Story County and a community readiness survey. Kowalski also spoke about Problem Gambling Month.

2020 Community Needs Assessment

Les White provided information about the 2020 Community Needs Assessment. White stated that the purpose of the survey is to determine the most important health and human services issues that need to be addressed in the County. Feedback will be used to help shape future programs and services. The survey has eleven questions and paper copies are being given to various clinics. The survey has also been sent by email to various groups in the County. Once the data is received back, the goal is to choose the top three to five needs in Story County. The final report should be completed by the end of the year and White will share the information at that time. Stephanie Jones will provide a link to the Board to complete the survey on line.

2020 Environmental Health Department Fee Schedule

Margaret Jaynes stated that each year the fee table is presented to set fees and provided the current fees. Paschen asked Jaynes if she felt the fees should change. Jaynes was comfortable leaving them the same, but septic fees would need to change if the new septic regulations are adopted. Swimming pool and spa fees are set in the contract with Iowa Department of Public Health. **Motion by Tabatabai, Second by Kluge to approve the 2020 Environmental Health Department Fee Schedule as presented. MCU**

Draft Septic Ordinance

Margaret Jaynes stated that since the changes have been brought to the Board several times, she stated that she would go through all of the major proposed changes. Changes include:

- Adding definitions (bedroom, evaluator/designer, classification of waters, abbreviations)
- Setting more stringent setbacks (increased to protect creeks)
- Limit shared septic systems (except in subdivisions that allow tanks at each house with shared treatment system on an out lot which is owned by an HOA)
- Identify when a permit or repair is needed (new construction, adding a bedroom, home business that alters wastewater volume)
- New wastewater generation that is to be directed to existing system (maintenance shop added or builds a new house after original house burned down)
- Professional evaluator to conduct site evaluations and the Sanitarian reviews (this is a big change where the County will no longer be doing the evaluation)
- Certified installer (was added several years ago and going smoothly)
- Holding tanks (routinely being pumped)
- Final inspection (to be able to cover part of the system as the work is being completed)
- Certificate of completion
- Responsibility/liability (protection for the County)
- Minimum level of maintenance required (mandatory pumping every five years for existing and new



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- systems)
- Maintenance contracts
 - Ordinance effective date

Draft Tanning Ordinance

Jaynes stated that IDPH regulations are still on the books, but they are not being enforced and all contracts with local BOHs have been dropped. If a county wants to enforce the tanning regulations, a local ordinance must be approved by the county. Jaynes stated that the draft tanning ordinance includes the requirements that had been required in the state IAC, formatted differently, and excluding the references to IDPH. There were only two substantive changes:

- Inspection Fees
- No one under the age of 18 will be allowed to use a tanning device as described in proposed ordinance.

Environmental Health did not hold a stakeholders meeting, but a letter would be sent out to tanning facilities and reach out to them to invite them to the Board of Supervisors three Public Hearings. Discussion took place about photosensitivity and additional discussion took place about whether or not to set up a stakeholders meeting before it is taken to the Board of Supervisors.

Motion by Tabatabai, Second by Kluge to approve the tanning ordinance for recommendation to the Board of Supervisors, after final proofreading and legal approval has been completed, and information shall be provided to the stakeholders prior to the Board of Supervisors meeting.

6. AGENCY AND DEPARTMENTAL REPORTS

- Story County Public Health** Treasa Ferrari provided information about the Corona Virus. Discussion took place about airport screening and mandatory quarantines after returning from China and the importance of handwashing to keep the virus from spreading, and the screening process questions taking place at both Public Health and Mary Greeley. Ferrari provided current influenza illness statistics and stated that initially there was more Influenza B and now it has switched to Influenza A.
- YSS** Denise Denton provided an update on the Story County Opioid Task Force and Nevada Substance Abuse Task Force. Narcan is no longer given out free, but still available for purchase from pharmacies. Denton provided information about a new bill being introduced called the No Pain Act bill that would support insurance coverage of alternatives to opioids. Denton shared information on cannabis, heart disease studies related to cannabis use, car crash study where THC tests were positive, and vaping.
- Story County Environmental Health** Margaret Jaynes provided an update on 17 well permits, 7 well plugging, 3 well rehabs, and 66 water samples. Grants to Counties for FY2020 has



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\$21,000 remaining. There was an enforcement action with the DOT after they had decided to plug their own well with a contractor that was not certified. The well was excavated and then properly plugged. Jaynes updated the total number of septic permits issued for calendar year 2020 and stated that last year started out slow as well, but caught up to the average by the end of the year. Complaints received – sewage backing up again in Nevada apartment, working with property owner to remove a burnt trailer from a November complaint at a trailer park, erosion on Skunk River at Ken Maril Bridge near Southdale. Jaynes updated Conceptual Reviews and trainings, and meetings completed by staff. Jaynes provided information about miscellaneous items – IOWWA's CIOWTS test re-write, Construction Evaluation Resolution and the filling of the Crestview lagoon.

7. COMMENTS

Staff: None
Board: None

8. ADJOURNMENT 3:34 p.m.

Approval of Minutes

Title and Date



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Special Meeting Minutes

AN AUDIO RECORDING OF THE FULL MEETING MAY BE FOUND IN THE ENVIRONMENTAL HEALTH DEPARTMENT, OR BY VISITING WWW.STORYCOUNTYIOWA.GOV

DATE: March 16, 2020

CALL TO ORDER: 7:00 p.m.

PLACE: Administration Building, 2nd Floor

Dr. John Paschen, Chair

Mark Speck, Vice-Chair

Dr. John Kluge

Dr. Louisa Tabatabai

Dr. Molly Lee

Lisa Heddens (Ex-officio)

*Absent

STAFF PRESENT: Stephanie Jones, Recording Secretary

OTHER PEOPLE PRESENT: Keith Morgan, Rose Kluge, Heather Bombei, Treasa Ferrari, Les White, Keith Linda Murken

1. CALL TO ORDER

Dr. John Paschen called the meeting to order at 7:00 p.m.

2. APPROVAL OF AGENDA MCU

3. PUBLIC FORUM

None

4. COVID-19 PRESENTATION AND DISCUSSION

Les White, Treasa Ferrari, and Sherri Zook provided a briefing on the the current Covid-19 situation. Many items were shared and discussed including:

- ◆ Number of confirmed cases of COVID-19 in Iowa and school closures.
- ◆ Current communication is being made with daily updates with Public Health, Emergency Management, Mary Greeley Medical Center, Story County Medical Center, and Iowa State University.
- ◆ Preparations taking place to respond to a positive COVID-19 case in the County.
- ◆ Ensure contact and quarantine processes are implemented, conducting trace-back assistance to positive individuals to identify the source and other potential infected personnel.
- ◆ Ensuring Story County Medical Center is optimized to meet potential increased utilization.
- ◆ How frequently the Board would like to be notified. Paschen stated public health should notify him regularly and he will forward information to the Board by email.
- ◆



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- ◆ There is an expected impact on Story County until June 2020.
- ◆ Lack of disinfection supplies may require public health to acquire and prioritize distribution of supplies. Paschen asked if McFarland was in need of supplies if they would be available from Public Health. White stated that there would be a process to determine who would receive needed items.
- ◆ Possibility for Story County BOH being required to implement area quarantines if someone with a positive test was not willing to self quarantine. Paschen asked how that would be done with meetings only being every other month. Heather Bombei stated that she would recommend someone check with the Story County Attorney to see how the process would work for the Board of Health. Paschen was interested in finding out if the Board could have authority to quarantine, and possibly a line of succession of Board members to make the decision without calling a meeting.
- ◆ Assignments of Individuals (Jurisdictional Executive - Board of Health, Incident Commander (Board of Health, Support Agencies - Mary Greeley Medical Center, Story County Medical Center, Medical Coalition and ISU)
- ◆ Concept of Operation Phase 1: Prevention/Mitigation (Developing a joint information system to distribute for guidance/information. (Email contact list for key stakeholders, identify Public Information Officer, social media, press conference procedures)
- ◆ Ensure critical facilities and services have adequate disinfection supplies and personal protective equipment (PPE). (Kluge asked who contacts would be at the schools with the schools being closed. Keith Morgan stated the superintendents could be contacted, but that someone would need to be monitoring messages.)
- ◆ Ferrari went through steps for what Public Health would do in the event of a positive test in Story County. (Special planning meetings are held daily at MGMC to determine potential impacts to the overall medical system.)
Phase 3 High Risk locations and Medical Facilities. (Loni Pringnitz, Story County Medical stated that there has been discussion with MGMC about options for availability of beds.
- ◆ Keith Morgan stated he would be available to present training to the Board to review the code and incident command structure, and current plans with modification. Training will be held March 20, 2020 at 4:00 in the EOC.
- ◆ Heddens asked how Public Health is receiving information from IDPH. White stated that health alerts are received daily as new communications are available and they are able to call IDPH at any time with questions.
- ◆ Who is currently being tested and if the time will come that physicians will be allowed to test anyone. White stated that at this time her understanding is the supply issue is why testing is limited. Heather Bombei stated that IDPH has been doing their best to keep up at the national level and notify public health departments.

Heddens asked for clarification on when the next board meeting should be. Paschen stated that the first thing needed is for guidance about quarantining from the County Attorney, and then felt that after the quarantining training Friday a decision could be made at that time if a special meeting is needed before the regular April 7, 2020 meeting.

Kluge asked if there is a way to be informed of information regarding only Story County, rather than the entire



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State or Polk County. White stated that MGMC website has a question and answer section and the IDPH and CDC websites are the best sites for current information, as well as the 211 phone number. There is not currently a resource that provides only information about Story County.

Molly Lee stated that veterinary resources could be considered for PPE.

5. ADJOURNMENT 8:25 p.m.

Approval of Minutes

Title and Date



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Special Meeting Minutes

AN AUDIO RECORDING OF THE FULL MEETING MAY BE FOUND IN THE ENVIRONMENTAL HEALTH DEPARTMENT, OR BY VISITING WWW.STORYCOUNTYIOWA.GOV

DATE: March 24, 2020

CALL TO ORDER: 6:00 p.m.

PLACE: Administration Building, 2nd Floor

Dr. John Paschen, Chair
Mark Speck, Vice-Chair
Dr. John Kluge
Dr. Louisa Tabatabai (Phone)
Dr. Molly Lee
Lisa Heddens (Ex-officio)
*Absent

STAFF PRESENT: Stephanie Jones, Recording Secretary

OTHER PEOPLE PRESENT: Keith Morgan, Ethan Anderson, Les White

1. CALL TO ORDER

Dr. John Paschen called the meeting to order at 6:00 p.m.

2. APPROVAL OF AGENDA Motion by Kluge, Second by Lee to approve agenda with the addition of an item for Discussion And Consideration Of Revised Temporary Employment Practices And Policy Related To Covid-19 And Any Future Amendments Made To the Temporary Policy By The Board of Supervisors. MCU

3. PUBLIC FORUM

None

4. ADDITIONAL ITEMS

Proper Procedure For The Board Of Health To Vote, Notify, And Enforce Isolation And Quarantine Emergency Orders Concerning COVID-19 Public Health Crisis.

Dr. Paschen stated that he feels the public will comply with self-quarantine guidelines, but there could come a time that someone refuses, so discussion is needed to determine the process in the event a quarantine order is needed and if one board member could have the authority to start the process and then a meeting be called with quorum within 24 hours to finalize a written order. Ethan Anderson stated that one person would not have the authority and the Board of Health would be required to have a meeting with a quorum. In the event that it is not practical to provide 24 hours' notice to hold a meeting, an emergency meeting could be held in person or electronically with a quorum and action would be voted on at that time. Anderson explained the written



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findings for a written order. Once a written order is approved, the Sheriff would then be authorized to take action to enforce. Heddens asked what the protocol would be for Public Health in regards to the need for a quarantine. Les White stated that many attempts would first be made for the individual to comply with a self-quarantine. After explaining to an individual the importance of quarantine, if they chose to not comply, Public Health would then contact the Board of Health and share all the attempts that had been made with the individual. Heddens asked when Anderson would need to be contacted to get involved. Anderson stated that the written order would be made following the meeting and approval had been made. Anderson would like to be contacted right away so that he can assist with the process from the beginning. Heddens asked if Stephanie Jones would need to be present in the event of an emergency electronic meeting being held. Anderson stated that any of the Board could take minutes. **Motion by Speck, Second by Kluge for the order of Board Members to be contacted in the event of an emergency meeting being called for a Quarantine Order would be Paschen, Speck, Lee, Kluge, Tabatabai, and also notify Ethan Anderson. MCU**

Shelter In Place For Story County

Tabatabai stated that she is concerned that when the students come back to empty out dorms there will be a large increase of positive tests. Discussion took place on if counties can order shelter in place. Heddens stated that she does not think that counties have the authority to make that order. Lee stated that some counties are writing letters of recommendation to the Governor to consider shelter in place. Anderson stated that he is not aware that the Board of Health would have authority to issue a shelter in place order, but that the Board could make a recommendation to do so. Paschen stated he does feel there will be an increase in positive tests, but at this time, he has a hard time deciding if a shelter in place would be necessary without further guidance. Heddens stated to keep in mind that not everyone is being tested so there are more positive cases in the area than what we are aware about. Lee stated that if a shelter in place was considered that essential services would need to be determined.

Protocol For Entering Into a Closed Session During A Public Meeting.

Paschen stated that the reason he wanted to discuss this is in the event there was a time in a meeting that information such as where the person works, or the town they live in needed to be discussed, which could be a HIPPA violation. White stated that her first thought would be the quarantine order where these items might be discussed. Anderson stated that reportable disease information might be included in a quarantine order, so that type of information would be public information. Anderson stated that discussion could be in closed session, but deliberation and action would need to be held in open session and the individual would be identified. Speck asked if people are in self-quarantine how often are they checked on by Public Health. White stated twice-daily checks are completed with specific questions asked, including temperature. Speck asked how long it is taking for test results. White stated that if sent to the state lab results are coming back within 24-48 hours, but if sent to a reference lab those results are taking 4-5 days.

Temporary Employment Practices and Policies in Response to the Novel Coronavirus (COVID-19) Pandemic



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**Motion by Kluge, Second by Speck to adopt the Temporary Employment Practices And Policy Related to Covid-19 and any future amendments made to the Temporary Policy by the Board of Supervisors.
MCU**

Routine Bi-Monthly Meetings Via Conference Call.

Discussion took place about how the Board members would like to hold future meetings. Lee feels it would be beneficial to offer the ability to call in if preferred. Heddens stated that there is no more than 10 people allowed at meetings. Kluge prefers to meet in the meeting room as normal; Speck is ok with either coming in or calling in. Paschen suggested that the option be given for those members that want to call in to do so and encourage presenters to provide all information before hand and be able to call in.

Emergent Medical Decisions That Impact Story County Covid-19 Response

Paschen stated that Mary Greeley is no longer doing elective procedures in order to save ventilators and personal protective equipment for emergencies related to Covid-19. There is protocol for babies being delivered if the mother is Covid-19 positive. At McFarland, everyone is being screened upon arrival to the building and all staff is screened daily. There is a sick clinic for all patients who are ill with possible communicable diseases at the North Ames McFarland location. Anyone being seen for other things such as injury follow up and lacerations would be seen at the main location. Pediatrics is still seeing well children for well checks. Paschen stated that the only way to get on top of this is to take it seriously by staying home and washing hands. Kluge asked if the capacity for hospital beds has been determined. Paschen stated that Story County Medical might be able to help with beds.

ADJOURNMENT 7:04

Approval of Minutes

Title and Date



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Special Meeting Minutes

AN AUDIO RECORDING OF THE FULL MEETING MAY BE FOUND IN THE ENVIRONMENTAL HEALTH DEPARTMENT, OR BY VISITING WWW.STORYCOUNTYIOWA.GOV

DATE: March 30, 2020

CALL TO ORDER: 6:00 p.m.

PLACE: Administration Building, 2nd Floor

Dr. John Paschen, Chair (Phone)

Mark Speck, Vice-Chair (Phone)

Dr. John Kluge (Phone)

Dr. Louisa Tabatabai (Phone)

Dr. Molly Lee (Phone)

Lisa Heddens (Ex-officio) (Phone)

*Absent

STAFF PRESENT: Margaret Jaynes, Environmental Health Director (Phone), Stephanie Jones, Recording Secretary

OTHER PEOPLE PRESENT: None

1. CALL TO ORDER

Dr. John Paschen called the meeting to order at 6:00 p.m.

2. APPROVAL OF AGENDA MCU

3. PUBLIC FORUM

None

4. ADDITIONAL ITEMS

Environmental Health Department Suspended or Modified Work Activities

Tabatabai asked for clarification about Jones monitoring social media. Jaynes stated that Stephanie looks on the sites and lets her know if I see anyone posting anything that needs her attention. Heddens stated that she did not recommend suspension of the items, but rather that the Governor had suspended the items and Heddens recommended that Jaynes let the Board know of the changes.



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Motion by Kluge, Second by Lee to adopt the Environmental Health Department Suspended or Modified Work Activities along with any subsequent changes that are approved by the Board of Supervisors.

VOTE:	Ayes	Nays
Speck	X	
Tabatabai	X	
Kluge	X	
Paschen	X	
Lee	X	

Story County Telework Agreement

Tabatabai asked for clarification on how time sheets will be filled out and Jaynes provided clarification that time sheets would be filled out by hand and a picture sent to her which would then send to Auditor. Once the pandemic is behind us, the originals will then be turned into Auditor.

Motion by Kluge, Second by Speck to adopt the Story County Telework Agreement along with any subsequent changes that are approved by the Board of Supervisors.

VOTE:	Ayes	Nays
Speck	X	
Tabatabai	X	
Kluge	X	
Paschen	X	
Lee	X	

Vacation Leave Maximum Accrual Amounts

Motion by Tabatabai, Second by Kluge to approve the Vacation Leave Maximum Accrual Amounts along with any subsequent changes that are approved by the Board of Supervisors.

VOTE:	Ayes	Nays
Speck	X	
Tabatabai	X	
Kluge	X	
Paschen	X	
Lee	X	

Determining if Meetings should be Special Meetings or Emergency Meetings

Discussion took place about meetings and that if an agenda is posted 24 hours in advance that it would be a special meeting, rather than an emergency and will be easier as far as posting requirements. The



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Board agreed that 24 hours' notice should be given whenever possible.

COMMENTS

Discussion took place about shelter in place. Heddens stated local boards do not have the power to order shelter in place, and that would have to be ordered by the Governor. Discussion took place about the Board issuing a statement to the public about doing a good job pulling together to keep Covid-19 positive numbers low. Jones will look into options for getting this out to public, notify the board, and place an item on the April 7, 2020 meeting agenda.

5. ADJOURNMENT 6:36 p.m.

Approval of Minutes

Title and Date

DRAFT PRESS RELEASE
FOR IMMEDIATE RELEASE
April 5, 2020

COVID-19: A Note to Story County Residents

AMES, Iowa— The Story County Board of Health is urging residents to stay vigilant in protecting themselves against COVID-19, with additional cases being diagnosed within our county, and as cases in neighboring counties and throughout Iowa increase rapidly.

Although we are several weeks into the outbreak as a nation, we are just beginning the fight in central Iowa. Now, “flattening the curve” in our own community is more urgent than ever.

One of the most effective ways to prevent exposure to the virus—thus protecting individuals as well as our entire community—is to stay home when possible (and absolutely when ill) and eliminate unnecessary activities and contact with others outside the home. This is especially important because the majority of individuals who contract the virus show either no symptoms or mild symptoms, but can still shed the virus into their environment. We applaud those business owners, public sector leadership, and community members who have taken this seriously, allowing employees to work from home or implementing practices such as delivery services, and encourage all to maintain and strengthen these standards where possible for the protection of themselves and our community.

For our essential workers and those who must leave their home for things like food or medical care, practicing social distancing—staying a minimum of six feet away from other individuals—can make a difference in slowing the spread of disease. We urge Story County residents to support one another in social distancing, and are pleased to see our community implementing practices such as allowing staggered work schedules and implementing measures to maintain physical separation and one-way directional flow between individuals.

Additional measures important in preventing COVID-19 include frequent handwashing, avoiding touching your face, frequent washing and disinfecting of surfaces, and appropriate use of personal protective equipment, such as masks and gloves.

For the most up-to-date information, recommendations, and response activities, visit the US Centers for Disease Control and Prevention (CDC) or the Iowa Department of Public Health websites.

The Story County Board of Health, in collaboration with Story County Public Health, is working closely with the Iowa Department of Public Health, Story County Emergency Management, Story County Board of Supervisors, and other entities to support the health of residents during the COVID-19 pandemic, but we can't stop this disease on our own. As a Story County resident, YOU are our greatest defense, and we are counting on you to make the right decisions now, so that together, we can save lives and emerge from this pandemic stronger than ever. Keep up the good work Story County, and stay safe.

###

Contact:

Name

Role

Contact information

Commented [LMJ[1]]: Who is the most appropriate contact? SC Outreach Manager, BOH Chair, SC PH, BOS, other?

I

Story County Public Health COVID-19 Medical Surge Plan

DRAFT

INCIDENT COMMAND

Story County Department of Public Health

PRIMARY AGENCY

Story County Board of Health
Story County Department of Public Health
Story County Environmental Health
Story County Medical Examiner
Local Emergency Medical Services
Hospitals/Medical Centers
Local Law Enforcement

SUPPORTING AGENCIES

Any agency providing support to medical surge activities

I. PURPOSE

The Story County Medical Surge plan is designed to maximize the ability of all medical resources within Story County to meet medical needs for those living in the county. This will be accomplished through the development of processes to collaborate on the sharing of resources both within the County and utilizing established processes to access resources outside the county.

II. SCOPE

This plan is applicable to medical operations within Story County associated with the COVID-19 medical emergency for a period as covered by the Story County Emergency Management Local Disaster Declaration. It provides direction for all entities involved in the delivery of medical services within Story County to include, but not limited to; hospitals, long-term care facilities, emergency medical services, dispatch agencies, law enforcement, and emergency management.

III. AUTHORITIES

- A. Regional Medical Coordination Center (RMCC) will coordinate request for resources, information on hospital capacities, and management of surge issues.
- B. Per Iowa Administrative Code 641 Section 77.3, Public health is responsible for safeguarding the community's health. To execute these duties during the COVID-19 emergency, Story County Public Health (SCPH), acting on behalf of the Story County Board of Health, is the incident commander for the COVID-19 medical emergency and will be responsible for the allocation of resources assigned to the incident command.
- C. Per Iowa Administrative Code Chapter 605 Section 7.3(4)c, the Story County Emergency Management Commission, through the Story County Emergency Management Agency (SCEMA) (to include the Story County Emergency Operations Center (SCEOC)) is responsible for effectively identifying, acquiring, distributing, accounting for, and utilizing resources essential to emergency functions. In Section 7.3(4)e the Commission shall establish and maintain the

capability to effectively direct, control and coordinate emergency and disaster response and recovery efforts through the SCEMA.

- D. Hospitals and Long-term Care (LTC) facilities are responsible for managing delivery of health care services within their facilities, managing resources under their direct controls, and coordination of patient surge issues for their facility through Story County Public Health, Story County Emergency Management, or the RMCC.

III. SITUATION AND PLANNING ASSUMPTIONS

A. Situation

1. There is a nationwide Disaster Declaration due to the COVID-19 influenza.
2. The Chair of the Story County Emergency Management issued a local disaster declaration on March 20, 2020.
3. Personal protective equipment (PPE) is in short supply and difficult to obtain.
4. Hospitals have taken measures to increase capacity to treat COVID-19 patients and are operating well within capacity.
5. Regional coordination of medical resources have been modified with the inclusion of Regional Medical Coordination Centers.

B. Planning Assumptions

1. Using data provided by healthcare organizations, projections of ventilator usage rates for those organizations due to COVID 19 infections at peak capacity.
2. PPE will continue to be in short supply throughout the period of peak medical surge.
3. Peak demands on the medical system will occur at different times for various locations within Iowa.
4. Medical planning must include normal medical service provided by Mary Greeley Medical Center to personnel that live outside Story County.

V. CONCEPT OF OPERATIONS

A. Priority is given to :

1. Life safety
2. Incident Stabilization
3. Protecting property & the environment

B. General:

1. The response to the COVID-19 emergency will be multi-phased and criteria for movement into some phases may never be met. Movement between phases will be defined by a medical facility reaching specific criteria as declared by representative for that facility.

C. Phase 1: Mitigation of COVID-19 and preparation for increased patients

1. Story County is currently in Phase 1. Through Proclamations by the Governor, mandatory social distancing has been enacted to slow the propagation of COVID-19 and reduce peak patient loads.
2. All medical facilities should provide SCPH contact numbers for personnel authorized to conduct medical planning, declare when a facility is transitioning between specified statuses, and participate in emergency surge operations coordination. These individuals must have the ability to make operational and financial commitments on behalf of their organization or have immediate access to individuals that can make these commitments.
3. Medical facilities have been encouraged to adopt practices to conserve PPE.
4. Request for PPE are sent to SCPH who ensure the requesting agency has implemented practices to conserve PPE, verify they currently have less than a seven (7) supply of the resource, and the request is only for a 7 day supply.
5. After validation of the request by SCPH, SCPH will attempt to fill the resource request within Story County. If the resource cannot be located within Story County, SCPH may request the SCEMA to forward the request to the State Emergency Operations Center (SEOC) and the RMCC.
6. The SCPH will conduct medical surge planning by integrating the RMCC into Story County operations.
7. Hospitals should report the following information in EMResource for consolidation by the RMCC.
 - a. Bed Capacity Information
 - b. Identification of direct 24/7 contact that manages beds (house supervisors/shift leaders/Director of Nursing)
 - c. Hospital's daily census from the previous day
 - d. Reporting staffing pool is being maintained or depleted
 - e. Immediate PPE and medical resources
8. Long-term health care facilities should report their status directly to the RMCC.
9. Should medical facility operations advance beyond their current status level, or they if anticipate they will increase or decrease their current status, they should immediately notify

SCPH of the situation and identify the resource that has precipitated the change. The status definitions are listed below:

- a. **Green:** Routine operations, manageable use of resources, manageable staffing, and normal level of care provided. (as defined by current levels of operations)
- b. **Yellow:** Modified operations to provide functionally equivalent care – care provided is adapted from usual practices and demands on critical resources are projected to exceed capacity within 72 hours.
- c. **Red:** Operations are exceeding capacity. There are critical shortages of staffed beds, equipment or supplies.

10. The primary care place for COVID-19 positive individuals should be their residence practicing social isolation. Only those COVID-19 patients needing skilled nursing care should be cared for in a hospital.

11. Individual testing COVID-19 positive that live in a location that would not permit them to return to their residence (there are other high risk residents at the location) are expected to make other living arrangements (such as hotel rooms) using their own resources.

12. Those that do not have the resources to procure other living arrangements, but are still required to self-isolate shall be considered as (homeless with housing to be coordinated by cities/county gov or quarantined with housing to be coordinated by BOH) and the appropriate jurisdiction shall be responsible for providing adequate living facilities for the individual until their self-isolation period is complete.

Commented [KWM1]: IAC Chapter 641 Section 1.12(4) could be used to justify setting up a facility for those cant comply with voluntary isolation

D. Phase II: Yellow status/Increased Medical Operations Near Medical Capacity

1. Phase II begins when a medical facility indicates to the RMCC and SCPH they have moved into a 'Yellow' status.
2. When a facility submits report indicating they have transitioned in or out of a yellow or red status, they should immediately contact SCPH and notify them of why their status has changed, actions they are taking due to their change of status, and identify any resource requirements to SCPH.
3. Medical facilities should continue operations utilizing their resources and develop processes to further conserve resources.
4. When a facility moves into a 'Yellow' status, SCPH should consult with the facility and request appropriate facilities participate in planning to develop options to improve the situation in the impacted facility.
5. These options should focus on use of resources within Story County, but if resources are not available within Story County, then the resource request should be elevated up through SCEMA to the RMCC and SEOC.

6. Options to optimize the current medical facilities maximizes the utilization of current medical infrastructure and the staff. These options may include:
 - a. Transitioning single patient rooms to multi-patient room.
 - b. Utilizing spaces previously used for other procedures that are no longer performed.
 - c. Utilizing common spaces within the hospital for patients.
7. After capacity is maximized within the hospital, spare capacity in other medical facilities should be considered. The SCPH does not have the authority to require medical facilities to accept additional patients, but they can assist with planning and collaboration with the facility that is becoming overloaded and other facilities within Story County. If all medical facilities within Story County are approaching maximum capacity, then SCPH will have the discretion to request the activation of a facility to provide low acuity isolation inpatient medical care, on behalf of the Story County Board of Health, through the SCEMA then the RMCC.

E. Phase III: Red Status/Capacity is exceeded at a medical facility

1. Operations are exceeding capacity of staffed beds, equipment or supplies. A declaration of a 'Red' status indicates that a life threatening situation exist or is about to occur. In these situations, medical facilities should utilize all processes available to ensure emergency patient care continues by directly contacting surrounding medical facilities to either procure emergency medical resources to continue treatment or to arrange transfer of the patient to a facility capable of providing appropriate treatment.
2. If the facility in 'Red' status cannot locate the resources needed to provide emergency patient care, then they should directly contact the RMCC for assistance locating either needed resources or assisting with a transfer of the patient to a facility with capacity to provide treatment.
3. The facility in 'Red' should contact SCPH as soon as possible to inform them of the situation to allow for planning to resolve the cause of the facility going 'Red' long-term.

F. Fatalities Management

1. Section 331.802 of requires a death investigation by the medical examiner for unattended deaths, violent deaths, disease thought to be virulent or contagious which may constitute a public hazard, and when the victim is unidentified (there are other situations that may require a death investigation during an emergency/disaster). Additionally, it requires the appropriate medical examiner to take charge of the body in these and other situations. If the emergency/disaster results in deaths that require a death investigation, then law enforcement shall secure the body in accordance with Chapter 127.2 of Iowa Administrative Code Chapter 641 and notify the SCME Office of the situation. At that time, the SCME will assume control the body until it is claimed by someone or in accordance with Chapter 142 of Iowa Code.

2. The SCME is responsible for the management of human remains in all mass fatalities incidents. SCME has the capacity to hold one body. If the number of anticipated fatalities level will be greater than this level, then it is likely that the SCME will request assistance of the State Medical Examiner for transportation and storage of bodies at the State Medical Examiner's facilities. During a medical emergency, it is unlikely ambulance assets will be available to transport bodies. The Emergency Support Function (ESF) 8 Coordinator may assist with locating appropriate transport assets for human remains. Documents in the SCEOC contains contact information for local funeral homes, along with their capacity to transport or store bodies, to help the ESF 8 Coordinator identify resources to support fatalities management.

VI. RESPONSIBILITIES

A. ESF Coordinator

1. Responsibilities of the coordinator include:
 - a. On behalf of the Story County Board of Health, implement Iowa Department of Public Health (IDPH) directives.
 - b. Act as the IC/UC to conduct medical planning for countywide medical operations, coordinate medical surge operations with medical facilities, coordinate the procurement and integration of SCEOC controlled resources into the response effort.
 - c. Coordinate with medical agencies both internal and external to Story County to provide the most efficient and effective medical response possible.
 - d. Provide subject matter expertise to the SCEOC for ESF 8 issues.
 - e. Coordinate ESF 8 operations with corresponding private-sector organizations.
 - f. Capture of response and recovery cost associated with ESF 8 for possible reimbursement.
 - g. Ensuring orderly demobilization and debriefing of ESF 8 resources.

B. Primary Agencies

1. When activated in response to an incident, the primary agency is responsible for:
 - a. Conducting response operations within their functional area as assigned by their jurisdiction or, when assigned to the EOC, as directed by the SCEOC Director, or SCEMA Coordinator or Deputy Coordinator.
 - b. Planning for short-term and long-term incident management and recovery operations.
 - c. Identifying operational priorities and activities to the SCEOC.

- d. Providing information on hospital capacity as requested by the RMCC or SCPH.
 - e. Providing staff to support ESF 8 operations at fixed and field facilities for missions request from the SCEOC.
 - f. Requesting assistance, through established 28E or MOU agreements, from support agencies. Requests for assistance from outside the county will be coordinated through the Incident Commander and SCEOC.
 - g. Managing mission assignments for their own assets and assigned support agencies, identifying spare capacity to the SCEOC, and notifying the SCEOC when assigned support agencies have completed assign task.
 - h. Ensuring financial and property accountability for activities and services provided.
 - i. Coordinating all media events with the SCEOC Public Information Officer/Joint Information Center.
2. Story County Emergency Management
- a. Maintain an emergency operations center to collect resource request from the IC and coordinate them with the RMCC and SEOC.
 - b. Maintain situational awareness of the capacity of the Story County medical system through reports from SCPH, RMCC, and SEOC.
 - c. Assist SCPH with medical planning.
 - d. Assist with public information operations related to medical operations.
3. ESF 7/Logistics, under the direct of the SCEOC
- a. Tracking ESF 8 related objectives and ensure they are properly integrated into EOC operations and plans.
 - b. Track the status of ESF 8 related resource requests and identify possible shortages to the SCEOC Director, or Emergency Management Coordinator or Deputy Coordinator.
- 4. Story County Board of Health/Public Health**
- a. Act as the jurisdictional executive for the implementation of IDPH directives.
- 5. Hospitals/Medical Centers/Thielen Student Health Center/Long-term Health Care Facilities**
- a. Conduct planning to optimize operations and create the maximum surge capacity as possible.
 - b. Provide accurate and timely information requested by the RMCC.

- c. Request resources through SCPH when appropriate.
- d. Identify points of contact that are available 24/7 to SCPH to conduct planning and emergency surge operations.

6. Story County Medical Examiner

- a. Conduct death investigations as required.

C. Supporting Agencies

1. Law Enforcement Agencies

- a. Provide law enforcement support when requested by SCPH for testing sites, quarantine orders, and security of medical stockpiles and operations.

VII. ABBREVIATIONS

ESF	Emergency Support Function
IC	Incident Command
IDPH	Iowa Department of Public Health
ISU	Iowa State University
MGMC	Mary Greeley Medical Center
RMCC	Regional Medical Coordination Center
SCEMA	Story County Emergency Management Agency
SCEOC	Story County Emergency Operations Center
SCME	Story County Medical Examiner
SCPH	Story County Public Health
TSHC	Thielen Student Health Center
UC	Unified Command



Application

345580 - FY21 Local Public Health Services Application Guidance

350888 - LOCAL PUBLIC HEALTH SERVICES FY21

Local Public Health Services

Status: Editing

Submitted Date:

Applicant Information

Project Officer

AnA User Id TRISHA.MACDONALD@IOWAID
 First Name* Trisha Ann Macdonald
First Name Middle Name Last Name

Title:

Email:* macdonald@mgmc.com

Address:* 918 Linn St

City* Story City Iowa 50248
City State/Province Postal Code/Zip

Phone:* 515-733-6035
Phone Ext.

Program Area of Interest* Local Public Health Services

Fax:

Organization Information

Organization Name:* Story County Board of Health

Organization Type:* County Government

DUNS:

Organization

Website:

Address: 900 6th Street

Phone: Nevada Iowa 50201
City State/Province Postal Code/Zip

Ext.

Fax:

Cover Sheet-General Information

Authorized Official

Name* John Paschen

Title* Chair

Organization* Story County Board of Health
If you are an individual, please provide your First and Last Name.

Address* 900 6th Street

City/State/Zip* Nevada Iowa 50201
City State Zip

Telephone Number* 515-382-7202

E-Mail* jpaschen@mcfarlandclinic.com

Fiscal Officer/Agent

Please enter the "Fiscal Officer" for your Organization.

If you are an individual, please provide your First and Last Name.

Name* Trisha Macdonald
Title Program Assistant
Organization Mary Greeley Medical Center
Address 1114 Duff Avenue

City/State/Zip Ames Iowa 50010
City State Zip

Telephone Number 515-233-7501

E-Mail macdonald@mgmc.com

County(ies) Participating, Involved, or Affected by this Proposal* Story County

Congressional District(s) Involved or Affected by this Proposal* 4th - Rep Steve King (R)
Congressional Map

Iowa Senate District(s) Involved or Affected by this Proposal* 23, 24, 25
District Map

Iowa House District(s) Involved or Affected by this Proposal* 45, 46, 48, 49
District Map

Business Organization Form - Contact Information

Provide the legal name of the eligible applicant. (examples include: XYZ County DBA XYZ County Board of Health, XYZ Community Action Organization, etc.) Please contact the fiscal officer of the applicant organization if you are unsure of the legal name registered with the Federal Internal Revenue Services (IRS).

Legal Name of Eligible Applicant:* Story County Board of Health

Provide the legal address of the eligible applicant. This is the address associated with the Federal Tax ID Number.

Applicant Legal Address:* 900 6th Street

Applicant City:* Nevada

Applicant State:* Iowa

Applicant Zip Code:* 50201

Applicant's Last 4 digits of Federal Tax ID Number:* 5024
Enter only the last 4 digits of your Federal Tax ID Number

Applicant's Phone Number:* 515-382-7202

Applicant's Fax Number:

Include the name of the Executive Director or Chief Executive Officer of the Applicant Organization. If the Applicant is a Board of Health/Board of Supervisors, include the name of the Board's authorized signatory.

Executive Director/CEO Name:* John Paschen

Select Title.

Title:* Board Authorized Signatory

Alternate Mailing Address for Warrant/Payment, as applicable

This section is optional and will be used by IDPH if the applicant is awarded a contract. As applicable, applicant may enter an alternate address (if different from legal address above) for IDPH to mail warrants/payments for provision of services.

Attention to: Mary Greeley Home Health Services

Insert alternate address, as applicable: 1114 Duff Avenue
Street or PO Box

City: Ames

State: Iowa

Zip Code: 50010

Business Organization Form - Business Structure

Identify the legal structure of the applicant. If the applicant is not a governmental organization, the applicant must be registered with the Iowa Secretary of State's office to do business in Iowa or agrees to register if awarded a contract.

Legal Business Structure of Applicant:* Government- County

Identify the state of incorporation or registration of the applicant.

State of Incorporation:* Iowa

Business Organization Form - Organization History

Provide a brief history of the agency.

History:* The Story County Board of Health is a department of the Story County Board of Supervisors. The BOH offices are located in Nevada, Iowa. The BOH consists of 5 appointed members. The BOH holds scheduled meetings six times per year. Minutes and agendas are posted on their website

This field is limited to 20,000 characters.

Include the agency's mission statement.

Mission Statement:* The Board of Health overview states that the local Board of Health shall have jurisdiction over public health matters within its designated geographic area according to Iowa Code chapter 137.

This field is limited to 500 characters.

Include the agency's vision statement.

Vision Statement:* The overview also states that the local Board of Health shall promote and protect the health of the citizens, and carry out the powers of local boards as specified in Iowa Code sections 137.6 and 137.7 and all other applicable Iowa Code chapters.

This field is limited to 500 characters.

Business Organization Form - Table of Organization

Attach a current table of organization.

Table of Organization:*

Organizational Chart.pdf

Business Organization Form - Disclosure of Litigation

Answer "no" or "yes" as to whether the applicant has any pending or threatened litigation, administrative or regulatory proceedings or similar matters which could affect the applicant's ability to perform required services.

Is there any litigation, administrative, or regulatory proceedings pending or threatened against your agency or subcontractor?*

No

If "yes", list and summarize any pending or threatened litigation, administrative, or regulatory proceedings or similar matters which could affect the applicant's ability to perform required services.

Business Organization Form - Disclosure of Contract Default

Has your agency or a subcontractor defaulted on a contract?

No

Contract or subcontract

Contact person

Telephone

Brief description of incident

Business Organization Form - Disclosure of Terminated Contract

Has your agency or subcontractor terminated a contract? Identify if it was contract or subcontract

No

Contract person

Telephone Number of Contact Person

Email Address of Contact Person

Brief description of incident

Business Organization Form - Disclosure of Contract Termination

Has your agency or a subcontractor had a contract terminated? Identify if it was a contract or subcontract

No

Contact Person

Telephone Number of Contact

Email Address of Contact Person

Brief Description of Incident

Business Organization Form - Disclosure of Financial Accountability

Have any irregularities of financial records been discovered to the applicant's accounts?

No

Identify each irregularity

Date of finding

Corrective action

Current status of resolution

Business Organization Form - Disclosure of Financial Accountability Contact Information

Contact Person:*

LesLa White

Telephone Number of Contact:* 515-233-7571
 Email Address of Contact Person:* white@mgmc.com

Application Certification and Conditions

The information contained in the Application Forms is accurate, to the best of my knowledge.

* Yes

Under no circumstances will any personnel, employee or independent contractor of the contractor, be paid by the programs applied for in this grant application or by any other programs administered by the contractor to an extent that would translate to a full-time equivalency of greater than 1.0. Furthermore, no time will be "double-charged".

* Yes

The organization has the resources to meet the goals and objectives included in this application for the amount of funds applied for.

* Yes

If a contract is awarded, based on my authority, the organization is committed to fulfilling the contract conditions from the Iowa Department of Public Health.

* Yes

If a contract is awarded, it is the contractor's sole responsibility to ensure appropriate individual(s) have registered within IowaGrants.gov and are granted access to the Grant Tracking site at www.IowaGrants.gov. The contractor acknowledges that all assigned individuals will have full rights (add, modify, and delete) for all Grant Tracking components including contractual forms, reporting forms, and claims submission.

* Yes

If a contract is awarded, I designate the following individual as the Grantee Contact with full responsibility for assignment of appropriate individuals to this grant in IowaGrants.gov

* John Paschen

I certify that my agency is not suspended or debarred or otherwise excluded from participating in provision of services in the event application is approved.

* Yes

I have read and understood the applicable Scope of Work for this Funding Opportunity.

* Yes

The BOH or BOS Authorized Signatory must complete this form and sign it by typing in their name.

Signature* John Paschen

Select your title.

Title of Signatory* Board Authorized Signatory

Insert the date the Board Authorized Signatory completed and signed this form. Click 'Save' at the top of the page.

Date form completed and signed* 04/01/2020

Optional: This area is provided for the uploading of Transmittal Letter or other communication to IDPH as applicable to this application. IDPH reserves the right to make the determination of the applicability of the communications at its sole discretion.

Attachment

Project Director Identification

Insert first and last name for the person that will be identified as the project director.

Project Director First and Last Name* Les White

Project Director Title* Director

Identify the agency in which the project director is employed.

Project Director Agency* Mary Greeley Medical Center Home Health Services

Project Director Phone Number* 515-233-7571

Project Director Email Address* white @MGMC.COM

Project Director Mailing Address (street or P.O. Box)* 1114 Duff Avenue

Project Director City, State, Zip* Ames Iowa 50010

Activity

Row	Cost Report Method	Start Date of Data	End Date of Data	Agency Cost	Agency Charge	Reimburse Rate	Line Item Number
Collaborative Relationships (Billing Unit: Hour)	Alternative Cost Report	07/01/2018	06/30/2019	\$56.17	\$0.00	\$56.17	
Community Health Assessment (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Community Utility (Resource Referral) (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Disease Outbreak Investigation, Reportable Disease Follow-up, Surveillance (Billing Unit: Hour)	Alternative Cost Report	07/01/2018	06/30/2019	\$55.32	\$0.00	\$55.32	
Family Support Home Visiting (Billing Unit: Visit)				\$0.00	\$0.00	\$0.00	
Foot Care Clinics (Billing Unit: Person)				\$0.00	\$0.00	\$0.00	
Health Education (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Health Hazard Investigation (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Health Promotion (Billing Unit: Visit)	CMS Cost Report	07/01/2017	06/30/2018	\$173.23	\$0.00	\$173.23	
Home Care Aide (Homemaker) (Billing Unit: Hour)	CMS Cost Report	07/01/2017	06/30/2018	\$42.70	\$37.00	\$37.00	
Home Care Aide (Personal Care) (Billing Unit: Hour)	CMS Cost Report	07/01/2017	06/30/2018	\$62.65	\$42.00	\$42.00	
Immunizations (Billing Unit: Person)				\$0.00	\$0.00	\$0.00	
Injury Prevention & Follow-up (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Local Board of Health Support (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Nursing (Skilled) (Billing Unit: Visit)	CMS Cost Report	07/01/2018	06/30/2019	\$301.28	\$285.00	\$285.00	
Nursing (Health Maintenance) (Billing Unit: Visit)				\$0.00	\$0.00	\$0.00	
Public Health System Development (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Resource Navigation (Care Coordination) (Billing Unit: Hour)				\$0.00	\$0.00	\$0.00	
Screening and Assessment (Billing Unit: Person)				\$0.00	\$0.00	\$0.00	

Additional Rate

Row	Activity Name	Billing Unit	Cost Report Method	Start Date of Data	End Date of Data	Agency Cost	Agency Charge	Reimburse Rate	Line Item Number
Activity 1						\$0.00	\$0.00	\$0.00	
Activity 2						\$0.00	\$0.00	\$0.00	
Activity 3						\$0.00	\$0.00	\$0.00	
Activity 4						\$0.00	\$0.00	\$0.00	
Activity 5						\$0.00	\$0.00	\$0.00	

Activity 6

\$0.00

\$0.00

\$0.00

Alternative Activities

Row	Activity Name	Billing Unit	Cost Report Method	Start Date of Data	End Date of Data	Agency Cost	Agency Charge	Reimburse Rate	Line Item Number
Activity 1						\$0.00	\$0.00	\$0.00	
Activity 2						\$0.00	\$0.00	\$0.00	
Activity 3						\$0.00	\$0.00	\$0.00	
Activity 4						\$0.00	\$0.00	\$0.00	
Activity 5						\$0.00	\$0.00	\$0.00	
Activity 6						\$0.00	\$0.00	\$0.00	

Authorized Agencies

Legal name of Agency	Legal Structure of Authorized Agency	Governing Board for Authorized Agency	Authorized Agency Street Address	Authorized Agency City, State, Zip Code	Authorized Agency Address- State.	Authorized Agency Address- Zip.	Authorized Agency Phone Number	Authorized Agency Administrator First Name	Authorized Agency Administrator Last Name	Authorized Agency Administrator Phone Number	Authorized Agency Administrator Email Address	Service Area the Authorized Agency will serve	Is a subcontract between the Board of Health and this Authorized Agency anticipated?	Draft Subcontract
Mary Greeley Medical Center Home Health Services	Non-Profit Corporation	Board of Directors	1114 Duff Avenue	Ames	Iowa	50010	515-239-6730	Les	White	515-233-7571	white@MGMC.COM	Story County	Yes	MGMCCountyBOHFY21.docx

Authorized Agency Key Personnel

Authorized Agency	Authorized Agency Key Personnel-Full Name (First and Last)	Authorized Agency Key Personnel Title	Authorized Agency Key Personnel Email Address
Mary Greeley Medical Center Home Health Services	Les White	Director	white@MGMC.COM
Mary Greeley Medical Center Home Health Services	Treasa Ferrari	Public Health Nurse	ferrari@mgmc.com
Mary Greeley Medical Center Home Health Services	Trisha Macdonald	Program Assistant	macdonald@mgmc.com
Mary Greeley Medical Center Home Health Services	Sherry Zook	Public Health Nurse	zook@mgmc.com

Alternative Plan Details**Alternative Plan Details 1**

Are there any Alternative Plans listed in the LPHS Budget form?* No

Authorized Agency

Activity

Amount \$0.00

Identify essential public health services to be delivered (all that apply)

Describe the activity to be delivered

Identify target populations to be served (all that apply)

Describe the anticipated impact to the community due to the use of this Alternative Plan.

Subcontracts Proposed

Are Subcontracts proposed for work and services of this project?*

Yes

Subcontract Plan

Subcontract Plan 1

Subcontractor Identified?*

Yes

Scope of Work to be performed through a subcontract*

Skilled Nursing visits, Health Promotion visits, Collaborative Relationships activities, Disease Outbreak Investigation, Reportable Disease Follow-up, Surveillance activities, Homemaker service, Personal Care Homemaker service

Anticipated Dollar Amount for each subcontract*

\$208,768.00

Name of subcontractor

Mary Greeley Home Health Services

Subcontractor Street Address

1114 Duff Avenue

Subcontractor Address: City, State, Zip Code

Ames

Subcontractor Address-State.

Iowa

Subcontractor Address-Zip.

50010

Subcontractor qualifications

Mary Greeley Home Health Services serves as the local public health agency for Story County and we are a certified home health agency

Service Area the Subcontractor will serve

Story County

Minority Impact Statement

Question # 1

1. The proposed grant programs or policies could have a disproportionate or unique POSITIVE IMPACT on minority persons.* No

If YES, describe the positive impact expected from this project

Indicate the group(s) positively impacted.

Question # 2

2. The proposed grant project programs or policies could have a disproportionate or unique **NEGATIVE IMPACT** on minority persons. *

No

If YES, describe the negative impact expected from this project.

If YES, present the rationale for the existence of the proposed program or policy.

If YES, provide evidence of consultation with representatives of the minority groups impacted.

Indicate the group(s) negatively impacted.

Question # 3

3. The proposed grant project programs or policies are **NOT EXPECTED TO HAVE A DISPROPORTIONATE OR UNIQUE IMPACT** on minority persons. *

Yes

If YES, present the rationale for determining no impact.

We accept all referrals at Mary Greeley Medical Center Home Health Services to evaluate for services. Once completed if appropriate, those services are provided regardless of minority.

Certification

I hereby certify that the information on this form is complete and accurate, to the best of my knowledge.*

Yes

Name of Person Submitting Certification.*

LesLa White

Title of Person Submitting Certification*

Director MGMC Home Health Services

County Information

County # 85

County Name Story County

Provide the name of the person who is responsible for submitting the minutes. This does not have to be a LBOH member.

Name:* Stephanie L. Jones, Administrative Assistant II

Provide a agency contact email address to receive key communications from the Department.

Email:* sjones@storycountyiowa.gov

Member Information

Date Revised	Select one:	Full Name	Title (if applicable)	Address	City	State	Zip Code	New Member	Term Exp. Date	Phone	LBOH Physician	Medical License #	E-Mail
03/23/2020	CHAIRPERSON	John J. Paschen	MD	McFarland Clinic, PC PO Box 3014	Ames	Iowa	50010	No	12/31/2020	515-239-4404	Yes	26890	jpaschen@mcfarlandclinic.com
03/23/2020	VICE CHAIR	Mark Speck		5620 Hickory Hills Drive	Ames	Iowa	50014	No	12/31/2021	515-233-3680	No		mspeck3680@aol.com
03/23/2020	MEMBER	John P. Kluge	DVM	2320 Timberland Road	Ames	Iowa	50014	No	12/31/2020	515-231-9917	No		jkluge@iastate.edu

03/23/2020 MEMBER	Louisa Tabatabai	1530 Northwestern Ave	Ames Iowa 50010	No	12/31/2021	515-291-4977	No	lbt@iastate.edu
03/23/2020 MEMBER	Molly Lee	55827 175th Street	Ames Iowa 50010	No	12/31/2022	515-294-2035	No	mollylee@iastate.edu

**MARY GREELEY HOME HEALTH SERVICES AND STORY COUNTY PUBLIC HEALTH
LOCAL BOARD OF HEALTH REPORT**

07/01/19 - 02/29/20

County: Story

MARY GREELEY HOME HEALTH SERVICES

3/31/2020

FUNDING SOURCE	Programs	Grant \$ Funded	Grant \$ Spent	Grant \$ % Spent	Specific Program	Number Story County Clients Served Utilizing State Grant Funds	COMMENTS
ESSENTIAL PUBLIC HEALTH SERVICES	Skilled Nursing, Health Promotion, Homemaker, Collaborative Relationships and Disease Outbreak Investigation, Reportable Disease Follow-up, & Surveillance	204,030	140,591.75	69%	SN	25	Mary Greeley Home Health Services provided skilled nursing visits to 205 Story County residents 07/01/19 through 02/29/2020. 25 (12%) clients received a full or partial discount for 1 or more of their skilled nursing visits. We accessed LPHS funds and other non-LPHS funding sources to cover Skilled Nursing visits provided at a discount.
					HP	HP = 380	MG Home Health Services provided Health Promotion Nursing visits to 380 Story County clients 07/01/19 - 02/29/20.
					COLLABOR - ATIVE RELATION- SHIPS		Collaborative Relationships includes activities which involve community partners to assist with identifying and addressing public health issues. We used LPHS funding for Collaborative Relationships. July 2019 through February 2020 we were engaged in more than 112 hours of collaborative relationship activities.

**MARY GREELEY HOME HEALTH SERVICES AND STORY COUNTY PUBLIC HEALTH
LOCAL BOARD OF HEALTH REPORT
07/01/19 - 02/29/20**

FUNDING SOURCE	Programs	Grant \$ Funded	Grant \$ Spent	Grant \$ % Spent	Specific Program	Number Story County Clients Served Utilizing State Grant Funds	COMMENTS
					Home - maker	27	Mary Greeley Home Health Services provided Homemaker service to 142 Story County residents 07/01/19 through 02/29/20. 16 (11.3%) of the Story Co. Homemaker clients paid full fee, 4 (2.8%) clients were paid by the MCO program (previously waiver), 10 (7%) clients were paid by VA and 112 (78.9%) paid according to our sliding fee scale. In addition to the LPHSC we used a variety of other funding sources to cover discounted Homemaker service.
					Disease Outbreak Investiga - tion, Report- able Disease Follow-up, Surveillance	50 Referrals	50 communicable disease cases were referred to MGMC Home Health Services from IDPH for the period 07/01/19 - 02/29/2020. In addition the Public Health nurses served as contact and referral sources for several TB cases. The PH nurses provided more than 524 hours of service for Disease Investigation, Surveillance and Follow-up of the TB and communicable disease referrals reported in Story County.
TOTALS		204,030	140,591.75	69%			

April 3, 2020

To: FY20 Local Public Health Services Contract Authorized Agencies

From: Bureau of Public Health Performance

Guidance for providing Homemaker Services billed to Local Public Health Services Contract during the COVID-19 Response

The health and safety of your clients, staff, families, and your community are of the utmost importance. This guidance is not intended to address every potential scenario that may arise but intends to provide insight to our local public health partners as they move forward with the best decisions for their particular agency and communities.

All activities funded through the Local Public Health Services Contract are funded at the discretion of the Contractor, the Local Board of Health. The activities of Home Care Aide (Personal Care) and Home Care Aide (Homemaker) are not a mandatory service.

We direct our local public health agencies to refer to their local boards of health as well as their own policies for reduction, termination, or disruption in service delivery. In reviewing your current level of service delivery, we encourage you to prioritize services to meet the fundamental basic needs of consumers who have no other support system.

If home visits are made to meet the basic fundamental needs, your staff should follow the current recommendations of the Iowa Department of Public Health and CDC to protect their health and the health of the consumer.

Addiction Experts Say Coronavirus Isolation is Trigger for Relapse

APRIL 2, 2020 BY [PARTNERSHIP NEWS SERVICE STAFF](#)



Addiction experts say they are worried the isolation required to combat the coronavirus pandemic is a national relapse trigger, [The New York Times](#) reports.

Some experts say the ban on group gatherings will soon lead to a rise in drug overdoses. “When we provide treatment, we talk about relapse triggers,” said Dr. Tim K. Brennan, Director of the Addiction Institute at Mount Sinai West in New York. “I’m hard-pressed to think of a bigger relapse trigger than what we’re going through now as a country.”

The pandemic is affecting every aspect of addiction treatment, including 12-step programs, clinics that dispense daily doses of addiction treatment medication, and programs that provide clean syringes to people living on the street.

Alcoholics Anonymous is urging local chapters to use online meetings and phone counseling. Federal agencies have issued new rules that will allow clinics to dispense extended quantities of buprenorphine and methadone to patients deemed stable, so they will not have to visit clinics every day.



Environmental Health Department
Administration Building
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Phone 515-382-7240
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Report to the Story County Board of Health for April 7, 2020

Thank you to the BOH members for holding a special meeting on March 30, 2020 to approve the Environmental Health Department's COOP/COG plan during the COVID-19 pandemic. Everyone in the department is teleworking and conducting limited field work. For field work, we ask the property owner to not meet us onsite (social distance if they feel they need to explain something). No staff goes inside a building.

Septics

- 21 applications, 9 permits issued to date for calendar year.
- 16 TOT inspections/binding agreements.
- Site reviews are still being conducted, without applicant or installer present.
- Final inspections of new installations still being conducted, requesting photos before system is covered.
- Not a lot of systems going in yet; installers focus on drainage tiling in the spring before the crops are planted.
- Due to the pandemic, the public hearings for the proposed septic ordinance have been put on hold.

Wells

- Two water wells permitted, 12 samples
- Three pluggings for calendar year.

Tattoos

- All inspections have been completed.
- One new facility in Nevada to open after pandemic. Bazylinski will conduct opening-inspection at that time.

Tanning

- Due to pandemic, the public hearings for the proposed tanning ordinance have been put on hold.

Pools

- Cory inspected approximately half of the indoor pools before IDPH shut the pools down for COVID-19.
- Ames Fitness had been allowing swimmers under age 18 to use the facility pool. There are no lifeguards on duty, and this is specifically not allowed according to the IDPH permit and existing variance. IDPH's legal council will decide if a new variance can be granted allowing swimmers under age 18 to swim with adult supervision (no lifeguards).

Complaints

- Mold, Nevada apartment.
- Air pollution from fire pit ashes, Fernald

Training

- Jaynes: mandatory drug-use recognition training, COVID-19 webinars, HR training - Success Strategies for Time of Change (Brenda Clark Hamilton-Fresh Coffee)
- Bazylnski: COVID-19 webinars, HR training - Success Strategies for Time of Change (Brenda Clark Hamilton-Fresh Coffee)
- Jones: COVID-19 webinars, HR training - Success Strategies for Time of Change (Brenda Clark Hamilton-Fresh Coffee)
- Cory: COVID-19 webinars

Meetings

- Auditor's Township Officials meeting. Jaynes presented a short overview of the proposed septic ordinance.
- Jaynes attended Watershed Assessment Working Group. Set up training for all county staff interested in spotting manure management practices impacting water quality. Training was cancelled due to COVID-19 (Iowa DNR working from home, limited travel).
- Jaynes attended county COOP/COG meetings in response to COVID-19. Virtual meetings are held every Wednesday or more if needed until the pandemic is over. EH gave all of the N95 masks we had in storage to EMS (small stack).
- Jaynes attended IOWWA board meeting.

Conceptual Reviews

- Izsak Walton League, Rasmusson, Johnson Hill, Anthony Acres

Miscellany

- Country Living MHP trailer received junking certificate. All set for removal, maybe after pandemic.
- Jaynes met with Fox Engineering and county folks to discuss wastewater plan for Dotson Farm SD.
- Jones posted for groundwater awareness week.
- Jaynes inspected Crestview lagoon status.
- Cory & Jaynes conducted two coco filter troubleshooting inspections with EcoFlo rep.
- Emergency Operations Center (EOC) has opened, but has not requested help from EH. Most of EOC work is for finding child care for emergency/health care workers and small business assistance.

Submitted by Margaret C. Jaynes on April 3, 2020