Bremer County Board of Health 415 East Bremer Avenue Waverly, IA 50677 (319) 352-0130

The Bremer County Board of Health called its special meeting to order at 6:32 PM on October 14, 2020. Present were members: Dr. Courtney Bochmann, Amanda Gesme, Dewey Hildebrandt, Sally Yungtum. Dr. Matt Sexton joined remotely via https://us02web.zoom.us/j/85175762541. Yungtum asked all other present to sign-in (see attached).

Motion by Hildebrandt, second by Gesme to approve the October 14, 2020 agenda. Motion carried unanimously.

Motion by Hildebrandt, second by Gesme to approve the minutes from the September 9, 2020 regular meeting. Motion carried unanimously.

Yungtum welcomed all guests in attendance and opened the floor for public comment. Yungtum asked that guests state their first and last name and limit their comments to two minutes per person. The board received public comments from: Julie Bloom, Katie Schwartz, Nicole Geerts, Rayla Leary, Sue Lahr, Nicole Wurzer, Sarah Westendorf, Jean Klunder, Robin Elliott, Zoie Bloom, Sara Jensen, Connie Cain, Jennifer Nuss, Dr. Ann Rathe, Chelsea Brase and Stacey Kettwig. Yungtum then introduced Erin Barkema, Region 2 Community Health Consultant with the Iowa Department of Public Health. Yungtum expressed gratitude to everyone for their comments, closing public comment at 7:18 PM.

Yungtum called for the board to discuss service provision and funding for the Bremer County Health Department. Yungtum asked Lindley Sharp to present the business plan that was requested of Sharp to create after the August 12, 2020 special Boards of Supervisor and Health meeting.

Sharp shared the business plan that she had been asked to develop at the August 12, 2020 special meeting. Sharp described that the most current problem at hand was that the department was facing a nursing shortage due to several resignations and that the nursing staff who had not put in a resignation were expected to be on medical leave until the middle of November/early December 2020. Sharp also stated that starting in 2016, the home health industry had undergone several significant changes including declining Medicare and Medicaid payments, decreases in the home health census, and that the department would be facing more restrictive regulations in 2021/2022.

During the special meeting on August 12, 2020, four different options were discussed, but the opportunity outlined in the plan would reflect the option to "decertify (no longer bill Medicare & Medicaid); provide non-certified home health as the budget allows (county tax allocation split between home health and public health); increase public health programs." Sharp shared public health opportunities based on the minimum capabilities public health agencies should be able to do when providing population-based public health services: assessment, all-hazards, communication, leadership & governance, community partnership, strategic/organizational planning, communicable disease, chronic disease & injury prevention, and environmental health. Sharp also shared health care capabilities of continuing to provide home care aide and skilled nursing services to individuals without insurance or wishing to pay privately and continuing to provide a loan closet.

The next part of the plan that Sharp shared was existing and new positions within the department based on the option to "decertify (no longer bill Medicare & Medicaid); provide non-certified home health as the budget allows (county tax allocation split between home health and public health); increase public health programs." Sharp also shared a preliminary department budget for fiscal year 2022 with the

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same level of tax-support of \$250,000. The final piece of the financial plan that Sharp shared was an overview of county tax-dollar contribution from fiscal year 2017-2020 so that the Board was able to see where and how the tax-dollars supported Bremer County.

The final piece of the plan was the execution of accepting the plan and all the decisions the board would have to make with a decision to "decertify (no longer bill Medicare & Medicaid); provide non-certified home health as the budget allows (county tax allocation split between home health and public health); increase public health programs."

Yungtum thanked Sharp for putting together and sharing the Business Plan. The board then discussed at length the plan and current issues facing the department. The largest concern discussed was the turnover in staff and the inability for the department to continue to provide cares without being in violation of Medicare Conditions of Participation and staffing licenses. The board discussed a feasible timeline of decertification and how long the department would be able to continue to provide home health cares with the current level of staff who'd not resigned. The board also discussed staffing agencies, which several board members had significant concerns with due to contract commitments and the amount of money associated with employing contracted staff. The board also discussed an option of paying outside home health agencies to take on remaining patients, but major concerns were raised with this as not all remaining home health patients were Bremer County residents so then tax-dollars for Bremer County would be going to another county to care for their own residents.

Sharp was asked how many patients were remaining and why many patients had already been transitioned to other providers when the board hadn't even made a decision on whether the agency would be decertifying or not. Sharp stated that due to staff resignations, many patients were referred onto other agencies so that they would not be a lapse in their care due to not having nursing level staff. Sharp also shared that there were approximately ten patients remaining (two Black Hawk County, one Butler County, and seven Bremer County residents) who still needed Medicare certified home health care. Sharp shared the struggles with finding placement for these individuals such as agencies not being able to accept more referrals, lack of staff at other agencies to take on additional patients at the present time, and agencies not wanting to take on specific patients due to their insurance provider.

Motion by Sexton, second by Hildebrandt to decertify, provide non-certified home health services as the budget allows, and increase public health programs effective October 31, 2020. Yungtum asked the board discuss the motion. Board members asked Sharp if finding new placement for home health patients remaining was going to be possible by October 31, 2020. Sharp stated the due to resignations and medical leaves, that the only skilled level nurse after October 27, 2020 would be a licensed practical nurse (LPN). Sharp stated that per conversation with the lowa Department of Inspections and Appeals that the department's LPN needed to be under the direction of a registered nurse (RN) in order to provide cares to patient and since Sharp had not received any medical releases allowing current RNs to return to work, that the department would be in violation of the Medicare Conditions of Participation and Chapter 80. Bochmann also stated that this would also mean that the LPN would be practicing outside their scope of practice and jeopardize their license. Katie Schwartz, Clinical Manager and RN, asked to speak and told the board that she would be released to return to work after October 16, 2020 and that Brase could continue to do home health visits. Schwartz who would be transitioning to an occasional staff effective October 17, 2020 was asked by Yungtum how she would manage overseeing the LPNs duties if she would be starting a new full-time job the following week. Schwartz stated that

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she would still have access to the department's electronic medical record system and would be available via phone. Yungtum asked if Schwartz and Brase would work together to ensure that patients cares continue to be met until placement was found for patients still under the department's care. Both agreed. The board then discussed a realistic date for voluntary termination of Medicare certification so that placement of patients with other home health providers would be achievable.

Motion by Bochmann, second by Gesme to amend the previous motion. Yungtum called for a vote to amend the previous motion to decertify, provide non-certified home health services as the budget allows, and increase public health programs effective October 31, 2020. Yungtum asked those in favor vote with an "aye" and those opposed vote with a "nay":

Bochmann: Aye Gesme: Aye Hildebrandt: Aye Sexton: Aye Yungtum: Aye

Motion carried to amend the motion.

Motion by Bochmann, second by Gesme to decertify, provide non-certified home health services as the budget allows, and increase public health programs effective February 1, 2021. Yungtum asked if there was any additional discussion. Hearing none, Yungtum called for a vote:

Bochmann: Aye- Stating that the number of resignations had put both the department and the board in a corner.

Gesme: Aye

Hildebrandt: Aye-Stating that coming to this meeting he had intended on voting the opposite, but had to be realistic given the lack of department staff and federal and state level decisions that have impacted the industry.

Sexton: Aye

Yungtum: Aye- Stating she was in agreeance with Bochmann's statement that the board had really been backed into a corner due to department resignations and leaves of absences that couldn't have been planned for.

Motion carried.

The Board of Health tabled the discussion on department positions to November 4, 2020.

The next regular Board of Health meeting will be held on November 4, 2020 at 6:30 PM at the Waverly Civic Center.

Motion by Bochmann, second by Hildebrandt to adjourn. Motion carried unanimously. Meeting adjourned at 9:42 PM.

Respectfully Submitted,

Lindley Sharp, Acting Secretary

	Bremer County BOH Sign-In
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2	Chelgen Pltersen
3	JULIE BROOM
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S	Layoin Elliot
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8	Chelsea Brase
q	Kattle Schwartz
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