

A Regular Meeting of the Durham County Board of Health, was held March 10, 2016 with the following members present:

James Miller, DVM; Teme Levbarg, PhD, MSW; Heidi Carter, MSPH; F. Vincent Allison; DDS; Rosemary Jackson, MD, MPH, CCHP; Mary Braithwaite, MD, MSPH; Stephen Dedrick, R.Ph, MS and Dale Stewart, OD

Excused Absence: Mary Ann Fuchs, DNP, RN, NEA-BC, FAAN; Commissioner Brenda Howerton; and Arthur Ferguson, BS

Others present: Gayle Harris, Eric Ireland, Joanne Pierce, Rosalyn McClain, Dr. Arlene Sena, James Harris, PhD; Chris Salter, Melissa Martin, Marcia Johnson, Hattie Wood, Attorney Bryan Wardell, Dr. Miriam McIntosh, Mel Downey-Piper, Eric Nickens, Michele Easterling, Will Sutton, Wanda Boone, Earl Boone, Marcus Williams, Alzona Pamplin, Chaquea Atkinson, Wahab Hassan, Jamie Steed and Christopher Smith.

CALL TO ORDER: Chairman Jim Miller called the meeting to order at 5:13pm with a quorum present.

DISCUSSION (AND APPROVAL) OF ADJUSTMENTS TO AGENDA:

Ms. Harris requested the following additions:

- TempTrak Accountability Response
- Public Comments—Proposal USDA Rule: Enhancing Retailer Standards in the Supplemental Nutrition Assistance Program (SNAP)
- North Carolina Harm Reduction Coalition Resolution—Support of Legalizing Syringe Exchange Programs in North Carolina

Dr. Levbarg made a motion to accept the addition to the agenda. Dr. Jackson seconded the motion and the motion was approved unanimously.

REVIEW OF MINUTES FROM PRIOR MEETING/ADJUSTMENTS/APPROVAL:

Mr. Dedrick made a motion to approve the minutes for February 11, 2016. Dr. Jackson seconded the motion and the motion was unanimously approved.

PUBLIC COMMENTS: There were no public comments.

STAFF/PROGRAM RECOGNITIONS:

- **Patrice Carr, On the Spot Award**
On February 2, 2016 Patrice Carr, the DINE in Childcare Nutritionist, received an On the Spot award from County Manager Wendell Davis. Patrice was nominated for the award because of her display of exemplary public service on Tuesday November 24, 2015. While pulling into the Human Services Building parking lot, Patrice noticed a small child with a bottle standing in the middle of Main Street without adult supervision. She quickly pulled over and picked the child up and carried her to safety. Patrice assessed the situation, realized that the child's guardian was not in the immediate area and brought the child to the information desk in the Human Services Building. Because of her quick response and clear thinking, the child was not hit by a car and was soon reunited with her father, who was frantically looking for her and had already contacted the police to report her missing. The award included a small monetary incentive. Patrice has been with DCoDPH since April 2015 and has quickly become a huge asset to the nutrition division. She has strong leadership skills and relates well to the population she serves.

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Marcia Johnson, Public Health IT Director introduced Mr. Juma Mussa who is the new Systems Support Technician. Mr. Mussa Juma will be assisting with our Public Health hardware and some software support and provide training on IT related software that has already been implemented here in the department.

ADMINISTRATIVE REPORTS/PRESENTATIONS:

There were no administrative presentations.

• **PUBLIC HEALTH VACANCY REPORT (Activity 37.6)**

The Durham County Board of Health received a copy of the vacancy report for February 2016 prior to the meeting. There were 18 vacant positions. There were no questions from the Board.

(A copy of the Vacancy report is attached to the minutes.)

• **NOTICES OF VIOLATIONS (NOV) REPORT (Activity 18.2)**

The Durham County Board of Health received a copy of the Environmental Health Onsite Water Protection Section NOV report through the end of February 2016 prior to the meeting. There were no questions from the Board.

(A copy of the NOV report is attached to the minutes.)

**Health Director's Report
February 2016 Activities**

Division / Program: Give Kids a Smile Event (Free Dental Clinic)

(Accreditation Activity 20.1- The local health department shall collaborate with community health care providers to provide personal and preventative health services.)

Program description:

- The annual Give Kids a Smile Program was held on Friday, February 5, 2016, providing free exams and services to youth under 21 years of age.

Statement of goals:

- To promote good oral health in children 0-20, and to provide oral health instruction to patients and their families, as well as the community at large (through press releases and media coverage of the event).

Issues

• **Opportunities**

- Dentists from the community participated in the event, including six UNC Residents under direction of Dr. Kimon Divaris as well as a hygiene student.
- The Department's Director of Dental Practice, Dr. Miriam McIntosh, and contracted dentist, Dr. Felicia Swinney, joined in the event.
- Volunteer opportunities were advertised in the PH Department's newsletter The Pulse which increased our number of interpreters available for staff and patients/families.
- Group presentations from the Nutrition and Health Education Divisions and the Positive Parenting Program were provided to parents/family members throughout the day. The programs provided 15-20 minute parent education on health and nutrition, time management and stress management. Parents were engaged and participated during the 45 minute visit while their child's treatment was being provided. Parents were also able to meet with a nutritionist for a private consultation.

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- Uninsured children, including patients who had to be rescheduled due to various inclement weather closings, received x-rays, screenings, and, in some cases, basic treatment (sealants, fillings).
- A clinic tour was added to the event at the end of the day. The hygienist led a tour of the clinic for 9 children from a local child care center. The tour included a walk around the clinic, a book reading, oral hygiene instruction, and a goody bag filled with a toothbrush, toothpaste, floss and clinic information.
- **Challenges**
 - Although this is an opportunity for free dental care, there were still six (6) no-shows.
 - While the clinic hoped to see up to 50 patients, given that additional treatment were provided, appointment times ran longer.

Implication(s)

- **Outcomes**
 - The addition of group presentations, completed with interpreters, was a well-received addition to the event.
 - The event was covered by multiple media outlets (newspaper and television).
 - The UNC Residents have expressed their interest in participating in future events, including the Back to School Smiles event in August.
- **Service delivery** – The event ran from 8:30 a.m. – 2:00 p.m. and 35 patients were treated. Eighty-four (84) parents/family members participated in the group presentations.
- **Staffing-** Four dental assistants, two hygienists, Director of Dental Practice, Division Director, Van Coordinator/Dental Assistant, and two front desk staff assisted with the event.
- **Revenue** – The Division provided the community with \$8,000 worth of dental services.

Next Steps / Mitigation Strategies

- Consider hosting the next GKAS event as a full-day event on Friday
- Consider hosting the event on an alternative day within an acceptable range of the nationally designated day in order to accommodate a full-day's schedule.

Division / Program: Community Health Division/Communicable Disease Program/ Community Health /Women's Health Program
(Accreditation Activity: Activity 7.2: The local health department shall conduct communicable disease investigations, follow-up, documentation, and reporting activities.

Program Description- Communicable Disease/ Women's Health

- To investigate and report all communicable diseases and conditions as required by local and state public health laws, in accordance with the recommendations of the N.C. Communicable Disease Branch and the centers for Disease Control and Prevention
- The Maternal Health Clinic under the Women's Health Program and provides comprehensive prenatal services to low income, medically low risk pregnant women.

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Statement of goals

- Address the emergence of Zika virus into the Western Hemisphere and recommendations for healthcare providers and public health practitioners
- Review the guidelines for management and reporting of the Zika virus disease in North Carolina
- Discuss the Zika virus and the North Carolina Public Health Response through State Conference calls
- Educate the pregnant women in the Maternity Clinic about the Zika virus and how an infection with this virus can result in problems with the developing fetus.
- Screen women in the Women's Health program who have recently traveled for the Zika virus.

Issues

- **Opportunities**
 - Provide adequate staff to promptly give guidance for those identified as travel –associated cases in the United States
 - Provide information and education on recommendations from the Centers for Disease Control and Prevention (CDC) from the health advisory on January 15, 2016
 - Ensure appropriate control measures are implemented to prevent disease transmission
 - Over half of the Maternity Clinic patients are originally from Mexico, Central America, or South America. The majority of the patients have family living in their home countries and often the maternal health patient travels back to their home countries.
 - The Maternal Health patients are the largest group of women in the Durham community who are at risk for the most serious consequence of infection with the Zika virus.
- **Challenges**
 - Assure appropriate testing, control measures and treatment of symptoms have been provided to confirmed or probable cases
 - The Maternity Health Clinic is a very busy clinic which already requires screening for multiple risks factors.

Implications(s)

- **Outcomes**
 - Communicable Disease staff received reports of six probable cases (five women and one man) of travel-associated Zika virus exposure while in South and Central America All six probable cases were asymptomatic and the lab work is pending
 - No reported symptoms of Zika virus or reported travel to one of the target countries has been reported from Maternal Health patients within 2 weeks of the screening.
- **Service Delivery**
 - The male that was exposed was given control measures regarding the use of condoms by the CD nurse.
 - Nurses and medical providers in the Maternity Clinic began screening patients for possible exposure to the Zika virus on 2/8/16.
 - Screening and education is provided during the course of regularly scheduled Maternal Health appointment.
- **Staffing**
 - A total of 10 Communicable Disease health staff participated in the webinars conducted by the NC Division of Public Health.

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- Maternal Health nurses, Family Planning Clinic nurses, and OB case management staff participated in the webinars conducted by the NC Division of Public Health.

Next Steps/Mitigation Strategies

- The Communicable Disease program will continue to investigate and report all communicable diseases and conditions as required by local and state public health laws, in accordance with the recommendations of the N.C. Communicable Disease Branch and the centers for Disease Control and Prevention
- Women's Health staff will continue to follow the recommendations for screening and education made by the NC Division of Public Health and the CDC as more is learned about the transmission and course of this infection

Division / Program: Community Health Division/ Child Health/Care Coordination for Children

(Accreditation Activity 12.3-The local health department shall participate in a collaborative process to implement population-based programs to address community health problems.)

Program description

The Care Coordination for Children (CC4C) Program provides nursing and social work services within a population care management framework to children from birth to age 5, who are high cost/high users of services, have special health care needs, in foster care and/or are exposed to toxic stress in early childhood.

Statement of goals

- Assist families to identify programs, services and resources that will meet the families' needs through home visits, doctor visits, telephone calls and other personal/professional contacts.
- Serve as a link between families and health care providers to offer information and support.
- Work with families to improve children's' health and well-being as families build, and/or maintain a close relationship with their health care providers.

Issues

- **Opportunities**
 - CC4C is a partner in a new collaborative effort with a new agency for homeless families, "Families Moving Forward" formerly Genesis Home, Interfaith Hospitality Network, and the portion of Urban Ministries that served homeless families.
 - The Families Moving Forward staff agreed to refer all children entering their residency that are under age five to CC4C under the toxic stress criteria, "homeless or living in a shelter".
- **Challenges**
 - Children, birth to 5 years of age, who meet the toxic stress criteria, "homeless or living in a shelter", may present with additional behavioral or mental health concerns.
 - Programs and services specific to this age group are, at times, the most difficult to access. Strong relationships with these providers are vital to the children's' health and well-being.

Implication(s)

- **Outcomes**
 - Care Managers will assess families' dynamics every six months using the evidenced-based Life Skills Progression Tool and

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- Care Managers will make appropriate community referrals based on assessment outcomes.
- **Service delivery**
 - CC4C works closely, in collaboration with families and community partners to implement and manage child health services
- **Staffing**
 - Three (2.6 FTEs) Senior Public Health Nurses
 - Three Social Worker II staff
 - One Human Services Coordinator
 - One Public Health Nurse Supervisor

Next Steps / Mitigation Strategies

- CC4C will continue to provide and participate in services/activities that promote the health and well-being of children, birth to 5 years of age, and their families.

Division / Program: Nutrition / DINE for LIFE / Cooking Matters at Lakewood Elementary School

(Accreditation Activity 10.2 - The local health department shall carry out or assist other agencies in the development, implementation and evaluation of health promotion/disease prevention programs and educational materials targeted to groups identified as at-risk in the community health assessment.)

Program description

- DINE for LIFE is a school- and community-based nutrition education program targeting SNAP-eligible Durham families.
- The DINE School Team provides nutrition education, taste tests, cooking demonstrations and/or cooking classes to qualifying Durham Public Schools (DPS) schools (those with 50% or more of their students receiving free/reduced lunch).
- Starting in October, students from Lakewood Elementary's YMCA afterschool program began Cooking Matters, a series of participatory cooking classes with a nutrition component. A school nutritionist from Durham County Department of Public Health's DINE program teamed up with Inter-Faith Food Shuttle (IFFS) to provide the programming.

Statement of goals

- To increase exposure to healthy foods, like fruits, vegetables, and whole grains.
- To increase students' cooking skills with simple kitchen equipment and ingredients.
- To increase students' ability to make smarter food choices through the use of basic skills, like food label reading and MyPlate meal building.

Issues

- **Opportunities**
 - The DINE program is established at Lakewood Elementary, and the nutritionist works with the Garden Club after-school program. This Cooking Matters series allowed for the nutritionist to expand into the YMCA's after-school program and reach more students.
 - The Cooking Matters after-school series complements Lakewood's DINE programming, in which hands-on cooking is not often possible due to time constraints during the school day.

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- The nutrition portion of Cooking Matters also allows for the nutritionist to reinforce concepts being taught in the DINE classroom sessions.
- **Challenges**
 - The classroom space available at Lakewood Elementary varied each week, which made setup and cleanup difficult.
 - Miscommunication between the YMCA and IFFS created some scheduling problems on early release and inclement weather dates.

Implication(s)

- **Service delivery**
 - Six classes through the Cooking Matters curriculum were delivered from October – December 2015. The first group of students graduated from the program.
 - Three classes through the Cooking Matters curriculum were delivered from January – February 2016 with three more classes scheduled. The second group of students is expected to graduate in March 2016.
 - Nutrition lessons included:
 - ❖ Food Groups through the MyPlate model (3 lessons)
 - ❖ Food Label Reading Lesson
 - ❖ Sugar Shocker Drink Lesson
 - ❖ Pop-up Grocery Store Tour
- **Staffing**
 - One DINE elementary school nutritionist collaborated with IFFS and the YMCA after-school program at Lakewood Elementary to complete the Cooking Matters curriculum.
 - Two volunteers worked through the IFFS to provide the cooking and food safety portion of the lessons.
- **Revenue**
 - No revenue is generated through this educational outreach.

Next Steps / Mitigation Strategies

- DINE will continue to provide programming at Lakewood Elementary and to collaborate with IFFS and the YMCA in an effort to promote healthy eating and improve cooking skills in Durham County's student population.
- DINE is planning to expand into another YMCA afterschool program at YE Smith.
- The YE Smith after-school program is planning a field trip to the Durham Public School Hub Farm in March 2016. DINE will collaborate with the farmers at the farm to provide a seed-to-belly experience, again increasing nutrition education experiences for the students.

Division / Program: Administration / Communications and Public Relations

(Accreditation Activity 5.3- Health Alerts to Media, 9.1- Disseminate Health Issues Data, 9.5- Inform Public of Dept. / Op. Changes, 10.2- Health Promotion –Disease Prevention, 21.2- Make Available Information About LHD Programs, Services, Resources)

Program description

- The Communications and Public Relations program provides accurate, timely, and relevant information to the residents of Durham County on key health issues as well as informing the public about department programs and services availability. Information is disseminated in many forms, included broadcast, print, and multimedia (web-based).

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Statement of goals

- To increase the public's awareness and understanding of important health information and the Department of Public Health's programs and services availability
- To increase the public's utilization of the Department of Public Health's programs and services.
- To become the main, trusted and dependable choice for journalists seeking information and assistance to develop compelling and balanced stories on Public Health issues.

Issues

- **Opportunities**
 - With staff dedicated to communications and public relations, the Department of Public Health can provide more information to the public on health issues
 - Media/reporters are eager to use information provided to them by the Department of Public Health for their viewers/readers. Television and radio announcers often request follow-up information and interviews.
- **Challenges**
 - Prioritizing the topics to publicize
 - Staff balancing external media requests with internal needs to review/revise/develop new media to promote programs and services.

Implication(s)

- **Outcomes**
 - Communication surrounding various health issues and department programs and services are being publicized in a timely, organized manner and with greater frequency.
 - Visibility of public health information from the department has substantially increased.
- **Service delivery**
 - As of February 25, three (3) general public health media releases or advisories have been disseminated. Staff have also responded to six (6) direct (unsolicited) inquiries from reporters. A total of 26 media pieces featuring or mentioning the Department have aired (television and/or radio), been printed in the news, or were posted to the web by local media during the month.
Topics and issues covered include:
 - ❖ Extensive coverage of the Department's annual Give Kids A Smile event⁽¹⁾⁽²⁾;
 - ❖ Continued coverage of the Department's independent investigation of the death of an inmate at the Durham County Jail⁽¹⁾⁽²⁾;
 - ❖ Informing the public of a Smoking Rule Survey being administered by the UNC Gillings School of Global Public Health;
 - ❖ Coverage of Vice President Joe Biden's visit to Duke to discuss the "Cancer Moonshot" initiative, where the Public Health Director served as a member of the panel⁽¹⁾⁽²⁾⁽³⁾;
 - ❖ A educational warning to the public about Zika-carrying mosquitoes and steps that can be taken to prevent mosquitos from breeding;
 - ❖ February's *My Carolina Today* segment, focusing on staying fit during the holidays;
 - ❖ Partnership for a Healthy Durham column in the Herald-Sun, focusing on taking charge of diabetes; and
 - ❖ Weekly restaurant inspection scores.

The Communications Team also released the February edition of *Community Connections*.

Next Steps / Mitigation Strategies

- Continue building/developing various communication channels as well as the Department of Public Health's delivery of information and communications.
- **Smoking Rule Assessment Project Update (Activity 34.5)**
- The Durham County Board of Health received a copy of the Executive Summary and Full Research Report conducted by the UNC Capstone Team to provide the board with recommendations to strengthen the existing Smoking Rule. There were no questions from the Board. The UNC Capstone Students will present at the next Board of Health Meeting, April 14, 2016.

COMMITTEE REPORTS:

- **FINANCE COMMITTEE RECOMMENDATION & FY16-17 PROPOSED BUDGET PRESENTATION (Activity 39.3)**

The Finance Committee met with Public Health staff on Thursday, February 25, 2016 to review FY16-17 Proposed Budget. Dr. Allison, Chair of the Finance Committee stated that the committee was very impressed with the budget presentation and felt that the budget reflected an enormous amount of due diligence on the part of the department in their budget priorities and ask of the County Manager and Board of County Commissioners.

Mr. Sutton provided the entire Board with a brief overview of the proposed budget request for next fiscal year and discussed major changes. A high level comparison analysis was provided showing the current FY 16 approved budget with the proposed budget for next FY 17 covering expenditures and revenues.

The following information was shared:

Actual Versus Proposed

1. Total Requested Budget \$26,205,994 (18.72% increase, \$4,131,765)
2. Personnel \$17,332,048 (24.08% increase, \$3,363,115)
3. Operating 8,873,946 (9.48% increase, \$768,650)

Funding Source

1. FY 16 County 73%, Other 27%
2. FY 17 County 78%, Other 22%
3. External funding (other) -3.36% decrease – largely due to DDC Grant Revenue reduction,

Behind the Numbers (Priorities- New Initiatives/Expansion)

- P3-PHEd Specialist (previously CHTF)
- P4-DDC New County Funding (Duke 343K, 168K Committed funds, 134K County)
- P5-Accountant – Additional support for the entire department
- P6-47 School Nurses – A nurse in every public school
- P7-Processing Assistant Increase .40 FTE
- P8-Cure Violence Initiative (8 FTE & Op) – reduce shootings/homicide
- P9-New Vehicle – 1999 Ford Econoline Van – 85K + miles
- P10-Pharmacist Increase .02 FTE
- P11-National Accreditation

Total Personnel - \$3,245,489

Total Operating - \$433,811

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Grand Total - \$3,682,300

Jail Health Contract – Up for bid for the upcoming year. FY 16 total \$3,353,242

Highest Bid \$3,184,154 (approximately \$200K decrease for FY 17)

Actual Versus Proposed (Without the Priorities-For comparison purposes)

1. Total Requested Budget - \$22,523,694 (2.04% increase, \$449,465)
2. Personnel - \$14,083,559 (0.82% increase, \$114,626)
3. Operating - 8440,135 (4.13% increase, \$334,839)

Fee Schedule Changes (Minimal)

1. Decreases for 340B pricing discounts
2. Dental correction
3. Environmental Health correction
4. All other fees remain the same

Managing For Results

Breakdown by programs identified during MFR - Current FTE 212.52

Dr. Allison made a motion to approve the recommended FY16-17 Budget as presented. Dr. Jackson seconded the motion and motion was unanimously approved.

OLD BUSINESS:

• **PUBLIC HEALTH AND VIOLENCE PREVENTION ACTIVITIES (Activity 14.1)**

Mr. Ireland, deputy health director provided the Board with an update on the department's continued activities to work with the community to implement a public health model to address violence (shootings and homicides) in Durham.

1. Received documentation from Lori Toscano, **Executive Director of National Programs, Cure Violence, School of Public Health University of Illinois at Chicago** on February 26th to include budget template, mock budget, hiring panel protocols and position description. Revised Cure Violence proposed budget (New Initiatives Form as well) and submitted to our Finance Director and Public Health Director on February 29th.
2. Met with Peter Skillern of Reinvestment Partners to further discuss Planning Grant application through RWJF. Will be meeting March 11th to continue the discussion and working on the next phase of the application process.
3. Met with Karmisha Wallace, Senior Assistant to the City Manager and Michelle Young to introduce the Cure Violence model to the City Manager's Office and establish a partnership with that office, Ms. Wallace asked us to present to the Violent Crime Reduction Roundtable on Tuesday, March 15th at 4:00pm.
4. Cure Violence Pre-Assessment Document submitted to the National Cure Violence Office for review and approval of Durham being designated as a Cure Violence Community. Also submitted was the Office of Justice Programs: Diagnostic Analysis for the City of Durham (Opportunities for Evidence-Based Technical Assistance (Executive Summary), which recommended adopting the Cure Violence Model as a possible violence intervention. March 3th, verified receipt of documents with Lori Toscano, who told me she hopes to have a decision for me next week.
5. Cure Violence Presentation to the Durham Director's, March 16th, at Alliance Behavioral Health.

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6. Reached out to Sheriff Andrews, to present on Cure Violence, spoke with Tracey Massey his Administrative Assistant, who informed me that he had asked Deputy Chief Ladd to contact in this regard, waiting to hear from the Chief Deputy.
7. Submitted Cure Violence as an innovation for the Healthiest Cities & Counties Challenge Innovators Proposal.

COMMENTS/QUESTIONS:

Dr. Allison inquired about community organizations role in "Cure Violence" and how can they reach out to gain involvement. His fraternity Omega Psi Phi has a local mentoring program, where they work with young African American males in the community. Mr. Ireland will contact Dr. Allison to obtain the contact information for one of the members.

Dr. Levbarg complimented the department on the all of the outreach work done to bring Cure Violence to Durham County.

TEMPTRAK FOLLOW-UP:

Mr. Ireland presented findings with regard to holding Cooper-Atkins responsible for the loss of vaccine when TempTrak failed to alert the department on December 4th. Mr. Ireland explained that a statement was requested and received from Durham County IS&T as to what transpired with this particular communication issue. In the statement it was explained that the glitch in the system was a set up problem on Durham County's end and not with Cooper-Atkins. County Attorney Bryan Wardell was asked to review the statement and the TempTrak contract and to provide a legal opinion on the matter. Attorney Wardell stated that based on what he read, in his opinion, there was no wrong doing on Coopers-Atkins end, and it would be a futile effort to try and recoup vaccine cost from Coopers-Atkins.

Mr. Dedrick inquired about ongoing monitoring of the TempTrak system, and was informed that the department has replaced all of the TempTrak sensors with new updated sensors and had them calibrated and Hans Steinhuebel, IT&S Technician monitors the system monthly through test text messages and emails.

• **UPDATE-PRI COMMUNITY HEALTH WORKER (CHW) PROGRESS (*Activities 41.2 & 41.3*)**

Ms. Joanne Pierce, deputy health director stated that the task force is continuing to work on the following activities:

- Support training program for Community Health Workers
- developed by Durham Technical Community College
- Create a certification process for CHWs
- Find funding for a pilot program

Dr. Miller asked for volunteers to serve on an ad hoc committee to identify the membership of the credentialing body, develop the overall functions of the body and propose the process by which CHWs will obtain certification. The committee will have the process in place for consideration by September 2016. Dr. Allison, Dr. Fuchs and Dr. Braithwaite volunteered for the committee. Dr. Miller will join the committee as Ex-Officio.

NEW BUSINESS:

• **RISKS ASSOCIATED WITH ENERGY DRINKS (*Activity 40.2*)**

Ms. Wanda Boone, Executive Director/Founder of Together for Resilient Youth (TRY) provided the Board with a brief overview of the Risks associated with energy drinks that pose potential health issues for adolescents.

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Ms. Boone stated that Energy drinks have no official federal definition, but they are generally thought of as beverages with caffeine and other stimulants marketed for their energizing effect. Caffeine levels vary between these drinks. An 8-oz. can of Red Bull might have 80 mg, while a 32-oz. Monster contains 320 mg. The Monster would probably be considered four servings, but the can is non-resealable, and many people tend to drink the whole thing like they would a soda. In the U.S., 80 percent of adults consume caffeine every day, and the average adult has a daily intake of 200 mg. Every person reacts differently to the drug, but the level where someone starts to have caffeine toxicity symptoms is usually about 400 mg. Ms. Boone stated that a 12-oz. (tall) coffee from Starbucks will run you about 260 mg, while a 14-oz. Dunkin' Donuts coffee contains 178 mg. But even just 50 mg of caffeine has the potential to induce tachycardia and agitation. At higher levels, "caffeine toxicity can mimic amphetamine poisoning and lead to seizures, psychosis, cardiac arrhythmias and, potentially but rarely, death," reads one 2012 study in the Medical Journal of Australia.

(A copy of the PowerPoint Presentation is attached to the minutes.)

After much discussion with the Board, Ms. Boone requested the following support from the Board of Health:

- Enact an age restriction (through a Board of Health Rule) for purchasing energy drinks due to the reported harms the caffeinated beverages can cause;
- Educate residents about the dangers of energy drinks
- Label coolers with Energy Drink specific information (age requirements) and place notice at the counter.

Dr. Miller asked for volunteers to serve on an ad hoc committee to learn more about energy drinks and the associated health risks that the drink may cause in adolescents. Dr. Miller asked the committee to make a recommendation to the full board regarding next steps after they have studied the issue. Dr. Levbarg, Mr. Dedrick and Dr. Stewart volunteered for the committee. Dr. Miller will join the committee as Ex-Officio.

- **PUBLIC COMMENTS—PROPOSAL USDA RULE: ENHANCING RETAILER STANDARDS IN THE SUPPLEMENTAL NUTRITION ASSISTANCE PROGRAM (SNAP)**

Michele Easterling, Director of Nutrition Division, presented draft language for the Board to consider submitting as public comments regarding the Proposed USDA Rule: Enhancing Retailer Standards in the Supplemental Nutrition Assistance Program (SNAP).

Proposed USDA rule: Enhancing Retailer Standards in the Supplemental Nutrition Assistance Program (SNAP)

The Durham County Board of Health and the Durham County Department of Public Health applauds the USDA's efforts to improve access to healthy foods for SNAP recipients. Hundreds of North Carolina residents and thousands of SNAP recipients nationwide can now access healthy foods due to the USDA's Food Insecurity Nutrition Incentive Program. We are excited that the USDA continues to expand its food access work and is now looking at how small grocery and convenience stores can improve access with the rule to Enhance Retailer Eligibility Standards in SNAP.

The Durham County Department of Public Health has been partnering with small grocery and convenience stores for three years to increase access to healthy foods for our residents. Therefore the rule to Enhance Retailer Eligibility Standards in SNAP is of great interest to us. We embarked on this project because residents responding to our community

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health assessment surveys and focus groups continually rank improving access to healthy foods in their neighborhoods as a high priority.

In the last three years, we have learned of a number of barriers that small store owners have in stocking of healthier foods. First, it takes time and targeted marketing to change shopping behavior. To run a successful program, store owners need technical support and training to determine appropriate items to stock and to assist with marketing, product placement, and proper storage and handling of fresh product. This requires staffing and financial resources that small store owners typically cannot provide. Store owners also often need extra equipment to display and store the food. When stores add too many items too quickly without targeted marketing, the store owners tend to lose profits. We strongly suggest a staged roll out that includes financial and technical assistance for the stores be included as part of the proposed rule.

Furthermore, in order for healthy store initiatives to be successful, store owners need to have a source from which to purchase low cost healthy items so they can sell the items at a price patrons are willing to pay. Distribution and purchasing infrastructure does not yet exist throughout most of the country to support this effort. The stores we work with do not have storage space and thus cannot purchase food in bulk quantities, making it difficult to purchase items at a low enough cost. Again, a staged roll out that includes time to build the supply infrastructure is necessary.

Finally, the lack of storage space at many small stores makes it nearly impossible for them to stay fully stocked all week long. Requiring stores to keep at least six of each required item stocked at all times will be a great burden on the stores with which we work. We suggest that the number and amount of healthy foods required be variable based on the capacity of the store.

The store owners we partner with are already working hard to increase access of healthy foods in our community. These same owners have expressed strong concern that the proposed ruling would create a financial burden for their stores. We fear this burden may be a disincentive for small grocery stores and convenience stores to accept SNAP, thus reducing the very access the ruling is trying to increase. The Durham County Board of Health and the Durham County Department of Public Health do not support the rule to Enhance Retailer Eligibility Standards in SNAP as it is written. However we support a revision of the rule to include a staged roll out as well as financial and technical assistance for the stores. This will ensure a more successful implementation of the proposed rule and more positive outcomes for the retailers and communities affected.

The Board asked that language be included that would recommend a waiver or exemption for smaller stores because of the difficulty they would have meeting the standards. The deadline for comments is April 18th. Ms. Easterling was asked to bring the revised comments before the Board during the April meeting.

- **NORTH CAROLINA HARM REDUCTION COALITION
RESOLUTION: LEGALIZING SYRINGE EXCHANGE
PROGRAMS IN NORTH CAROLINA**

Ms. Harris requested Board support for the North Carolina Harm Reduction Coalition' Resolution in support of Legalizing Syringe Exchange Programs in North Carolina. Melissa Martin, director of Allied Health Services said that legislation was passed in May of 2015 to legalize syringe exchange programs. Ms. Harris will check with NC Association of Local Health Directors to clarify the intent of the resolution and bring this information back before the Board during the April meeting.

14 A Regular Meeting of the Durham County Board of Health, held
March 10, 2016.

• **BUDGET AMENDMENTS:**

Ms. Harris requested board approval to recognize funds in the amount of \$49.00 from the NC Communicable Disease Branch, Division of Public Health. Funds will be used to purchase condoms for persons at high risk for HIV and STDs in the STD program in order to reduce the spread of STDs and HIV.

Mr. Dedrick made a motion to approve the budget amendment in the amount of \$49.00. Dr. Jackson seconded the motion and the motion was unanimously approved.

• **AGENDA ITEMS APRIL 2016 MEETING**

Ms. Harris presented several options for agenda items for the next meeting. The Board selected the following items:

- Update on Public Health Violence Prevention Activities
- UNC Capstone Team Report (Smoking Rule)
- Jail Health Update
- Update on Budget Meeting with County Manager
- Public comment on Proposed USDA Rule: Enhancing Retailer Standards in the Supplemental Nutrition Assistance Program (SNAP)
- Update on NC Harm Reduction Resolution

INFORMAL DISCUSSION/ANNOUNCEMENTS:

Ms. Downey-Piper introduced the NCCU Health Education Intern students who will be with the department until April 26th.

Dr. Allison made a motion to adjourn the regular meeting at 7:06pm. Dr. Levbarg seconded the motion and the motion was unanimously approved.



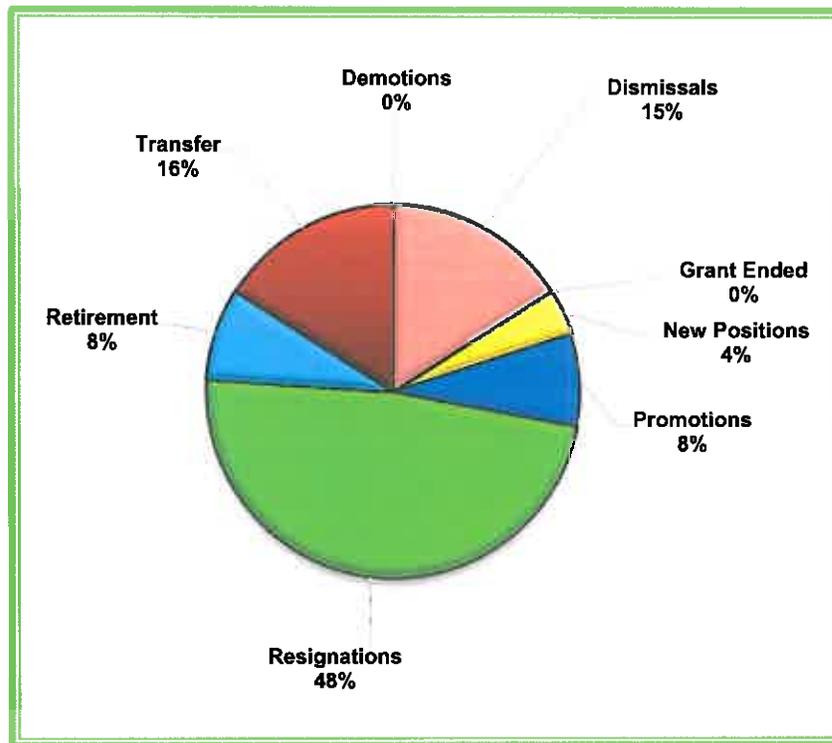
James Miller, DVM-Chairman



Gayle B. Harris, MPH, Public Health Director

PUBLIC HEALTH VACANCY REPORT
July 1, 2015 through June 30, 2016
Month Ending 2/29/2016

<u>Vacancy Reasons</u>	<u>FY 14/15 *</u>	<u>FY 15/16**</u>	<u>Total</u>	<u>%</u>
Demotions	0	0	0	0%
Dismissals	0	4	4	16%
Grant Ended	0	0	0	0%
New Positions	1	0	1	4%
Promotions	0	2	2	8%
Resignations	1	11	12	48%
Retirement	0	2	2	8%
Transfer	0	4	4	16%
	2	23	25	100%



*2 positions remain vacant from FY 14/15.

**FY 15/16 vacancies are cumulative

2 position(s) became vacant in February 15/16

18 position(s) were vacant out of 216 permanent positions, 212.52 FTE positions for February, 2016

total # of vacancies for Feb	18
total # of employees	216
% of vacancies	8%

FY 15/16 February -2016

Position Number	Position Title	Leave Date	Recruit Began Date	Recruit End Date	Start Date	Notes
40007628	Sr PH Nurse	7/25/14	8/11/14, 3/13/15, 6/22, 7/10	8/29/14, 9/5/14, 4/17, 7/24/15	10/12/15	
40006775	Dental Assistant	8/8/14	6/23/14, 10/13, 1/16, 4/6, 8/21	8/1/14, 12/19, 1/30, 4/25, 5/30, 9/18	11/9/15	
40001153	Env Health Specialist	1/15/15	1/12/15, 3/30, 10/28	1/30/15, 2/6/15, 5/15, 11/6	7/20/15	
40006525	PH Epidemiologist	2/16/15	3/16/15, 8/24, 12/10/15	3/27/2015, 9/4/15, 1/30/16		VACANT
40007626	Sr PH Nurse	2/18/15	6/29/15	7/17/2015, 7/31, 8/15/15	9/28/15	
40004426	PH Educator	3/2/15	3/16/15	3/27/15	7/6/15	
40008525	Processing Assistant	3/3/15	3/16/15	3/27/15	8/3/15	
40001161	Processing Assistant	3/27/15	4/16/15	4/24/15	7/6/15	
40001139	Sr PH Nurse	4/24/15	6/29/15	7/17/2015, 7/31, 8/15/15	11/9/15	
40008575	Nutrition Specialist	5/1/15	6/1/2015, 10/5, 10/29	6/12/15, 6/26, 10/24, 12/4		VACANT
40000989	Office Assistant	5/6/15	5/11/15	5/15/15	8/17/15	
40003878	Sr PH Nurse	5/8/15	5/6/15	5/22/15	7/6/15	
40001013	Sr Medical Lab Assist	5/18/15	6/1/2015, 7/15	6/12/2015, 7/31, 8/7	10/12/15	
40001010	IT Support Specialist	5/22/15	10/2/15	10/16/15	2/18/16	
40007501	PH Nurse Spec	6/24/15	6/22/15	7/17/15, 8/15/15	9/28/15	
40001082	Sr PH Nurse	7/3/15	7/13/15	7/31/15, 8/7	10/12/15	
40003879	PH Nurse Spec	7/24/15	7/20/2015, 8/28, 11/16, 12/15	7/31/15, 8/7/15, 9/18, 1/15		VACANT
40001011	Medical Lab Supervisor	8/12/15	8/31/2015, 12/21/15	9/11/2015, 9/25, 1/29/16		VACANT
40001084	Sr PH Nurse	9/4/15	8/17/15	8/28/15	11/23/15	
40007988	PH Education Spec	9/11/15	9/21/15	10/2/15		VACANT
40001154	Env Health Specialist	9/24/15	10/12/2015, 2/15/16	10/23/2015, 11/13, 3/4		VACANT
40003400	PH Nurse Program Mgr	9/25/15	10/5/2015, 12/13/15	10/16/2015, 12/4/15, 2/26/16		VACANT
40001048	Sr PH Nurse	9/25/15	10/5/15	10/16/15	12/7/15	
40001119	Physician Extender	10/1/15	11/2/2015, 12/13/15	11/28/2015, 1/8/16, 1/22, 2/5		VACANT
40001153	Env Health Specialist	10/15/15	10/12/2015, 10/28	10/23/2015, 11/6		VACANT
40007630	Sr PH Nurse	10/30/15	11/9/2015, 12/15, 2/2/16	11/27/2015, 1/8/16, 2/12/16		VACANT
40001009	Medical Lab Technician	11/6/15	11/16/15	11/27/15	2/15/16	
40001140	Sr PH Nurse	11/17/15	12/15/2015, 1/29/16	1/22/2016, 2/12/16		VACANT
40001083	Sr PH Nurse	11/20/15	10/26/15	11/6/15	1/4/16	
40001052	PH Nurse Supervisor	12/4/15			1/18/16	
40001164	Env Health Specialist	12/15/15	2/15/16	2/26/16		VACANT
40001014	Sr Medical Lab Assist	12/16/15	1/11/16	1/29/16		VACANT
40001165	Env Health Specialist	12/18/15				VACANT
40001156	Env Health Specialist	12/18/15	2/15/16	3/4/16	2/15/16	
40001142	PH Nurse Supervisor	12/31/15	12/15/16	1/8/2016, 2/5		VACANT
40001050	PH Nurse	1/15/16	2/3/16	2/26/16		VACANT
40007600	Sr PH Nurse	2/12/16				VACANT
40005365	Nutrition Specialist	2/29/16				VACANT

ENVIRONMENTAL HEALTH
Onsite Water Protection Notices of Violation
February 2016

NOV DATE	SUBJECT PROPERTY ADDRESS	TYPE OF VIOLATION	NOV EXPIRATION DATE	FORWARDED TO CO. ATTY?	COMPLIANCE STATUS (YES/NO)	COMPLIANCE DATE	NOTES	
3/12/2014	7001 Herndon Rd	Surface discharge of effluent	4/10/2014	Y	N		3/10/2014 - Site visit, confirmed surfacing effluent. Municipal sewer available. 6/1/14 Owner has applied for sewer connection and is awaiting tap installation. Property has completed the annexation process.	4/20/2015- Public Works Engineering states no application has been received for connection to sewer. 10 day letter needed. 5/20/15 - 10 day demand letter issued by County Attorney's Office. 2/29/2016 - Site visit is scheduled for first week of March to verify system failure, per recommendation of County Attorney's office.
3/20/2014	913 Cartman	Surface discharge of effluent onto neighbor's yard	4/20/2014	Y	N		3/20/2014 - The complaint is valid. Issued NOV 4/29/2014 - Return visit made by EH, course of action to remedy failure communicated to owner. NOV forwarded to County Attorney's office 8/14/2014	Owner has stated he will not repair the system. 6/4/2015 - 10-day demand letter issued by County Attorney's office. 2/3/2016 - Requested County Attorney's Office file for injunctive relief.
12/17/2014	3500 Interworth	Surface discharge of effluent	1/19/2015	N	N		Discharging via a culvert pipe.	3/1/15-Owner is seeking a NPDES permit from NC Div. of Water Resources. 1/19/2016 - EH has verified that NPDES permit application is currently being reviewed by NC Division of Water Resources.
5/5/2015	207 Breedlove Ave	Effluent surfacing and backing up into house	6/5/2015	N	N		Effluent is discharging to the ground surface, sewage is backing up into the basement, septic tank has tree root intrusion. Non-repairable lot. Owners have applied to NC DWR for a discharge system permit.	1/19/2016 - EH staff has verified that NPDES permit application is currently being reviewed by NC Division of Water Resources.
5/7/2015	920 Snow Hill	Surfacing effluent	6/7/2015	N	N		Surfacing effluent. Recommended a course of maintenance procedures in attempt to abate failure. EH will continue to monitor the system.	7/20/2015- Verified water use is within permit design. ENV HLTH continues working with homeowner & contractor to repair existing LPP.
6/25/2015	5114 Leesville Rd	Surfacing effluent, straight pipe from basement plumbing, and property line setback violation	7/25/2015	Y	N		Existing system crosses property line and is discharging effluent to the ground surface. Basement plumbing is discharging via straight pipe into gutter drain. Repair permit issued same day as NOV.	2/19/2016 - 10-day demand letter issued by County Attorney's Office.
9/28/2015	6101 Cheek Rd	No Subsurface Operator	10/28/2015	Y	N		EH has not received system management reports as required by rule.	2/19/2016 - 10-day demand letter issued by County Attorney's Office.
10/21/2015	4601 West Ave	Surfacing effluent, unpermitted repairs straight pipe discharge,	11/21/2015	Y	N		Municipal sewer is available.	2/19/2016 - 10-day demand letter issued by County Attorney's Office.
10/21/2015	2639 E Geer St	unpermitted repair work, setback violations, septic tank subject to vehicular traffic	11/21/2015	Y	N		Municipal sewer is available.	2/19/2016 - 10-day demand letter issued by County Attorney's Office.
10/28/2015	1725 Infinity Rd	No Subsurface Operator	11/27/2015	N	N		EH has not received system management reports as required by rule.	
10/28/2015	3050 Ruth St	No Subsurface Operator	11/27/2015	N	N		EH has not received system management reports as required by rule.	

10/22/2015	3817 Cheek Rd	Unpermitted connection to Controlled Demonstration system and graywater straight pipe	11/22/2015	N	N	Residential care facility. Main house has a straight pipe discharging washing machine effluent to ground surface. Office building is served by a Controlled Demonstration System. This system now has a second, unpermitted inlet pipe of unknown origin plumbed into the septic tank.	11/24/2015 - Unpermitted connection was removed from Controlled Demonstration System. Washline is being redirected to conventional system.
11/30/2015	1912 Torredge	Surfacing Effluent	12/30/2015	N	N	System is discharging to ground surface.	
11/30/2015	6448 Guess Rd	Surfacing effluent	12/30/2015	N	N	Pressure manifold is damaged.	8/19/2015 - USPS returned NOV as non-deliverable. 11/30/2015 - NOV hand delivered.
1/6/2016	804 Hardscrabble Dr	Effluent backing up into septic and pump tanks.	2/6/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/16/2016	3208 Hopkins Rd	Surfacing Effluent	3/17/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/16/2016	111 Stockbridge Pl	Surfacing Effluent	3/17/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/16/2016	6038 Burgundy Rd	Surfacing Effluent	3/17/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/16/2016	6020 Burgundy Rd	Surfacing Effluent	3/17/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/16/2016	5 Treadway Ct	Surfacing Effluent	3/17/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/16/2016	1807 Infinity Rd	Surfacing Effluent	3/17/2016	N	N	System failure discovered during mandated 5-year maintenance inspection.	
2/18/2016	704 Hazelwood St	Surfacing Effluent	3/19/2016	N	N	Issue was discovered during complaint investigation of water discharging onto neighbor's driveway. Water sample was taken from ditch and tested positive for anionic surfactants. Ammonia test was inconclusive due to sample turbidity.	

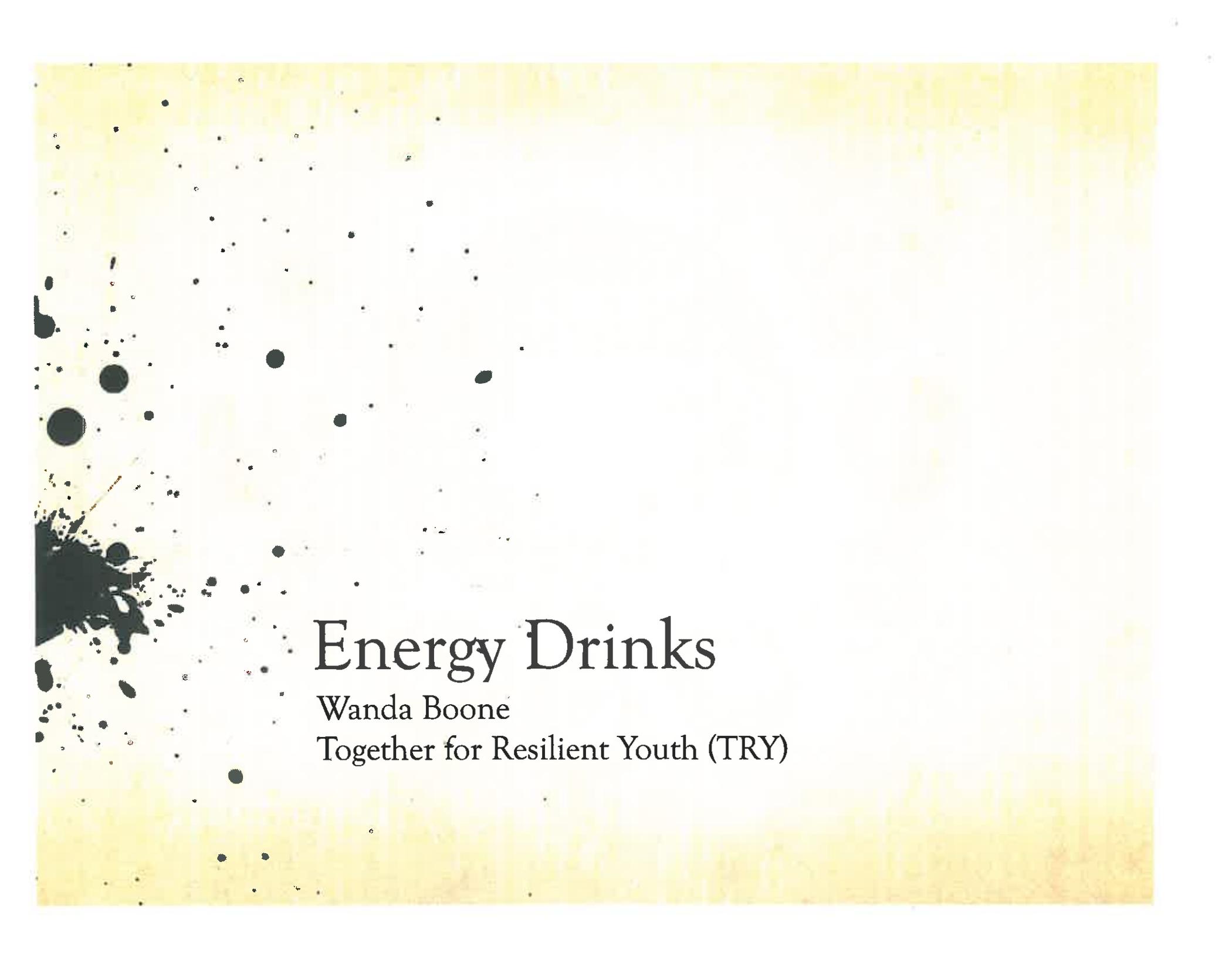
ENVIRONMENTAL HEALTH
Compliant NOV's
February 2016

NOV DATE	SUBJECT PROPERTY ADDRESS	TYPE OF VIOLATION	NOV EXPIRATION DATE	FORWARDED TO CO. ATTY?	COMPLIANCE STATUS (YES/NO)	COMPLIANCE DATE	NOTES	
12/23/2015	310 N Fork Lane	Repair area destroyed by construction of pond	1/23/2016	N	Y	2/3/2016	Area reserved for repair has been destroyed by construction of a pond. An intent to revoke Improvement Permit has been issued. **2/3/2016 - Revised Improvement and Operation Permits have been issued by EH.**	
4/9/2015	2515 E Club Blvd	Surfacing effluent	5/11/2015	N	Y	2/3/2016	Surfacing effluent, non-repairable lot. Owner directed to NC DWR. **EH verified that house is vacant and is currently being used as a storage building only. PVC pipe located on ground surface is a sump pump discharge for crawl space water.**	5/7/2015 - Owner contacted EH and stated the house would be vacated on May 30th.
4/16/2015	826 Colonial Height	Surfacing effluent	5/18/2015	N	Y	1/14/2016	Surfacing effluent **EH staff verified that failure has abated, most likely due to reduced water use.**	5/16/2015 - Non-repairable lot. Owner referred to NC DWR for NPDES permit.
3/10/2015	3912 Swarthmore	collapsing tank	4/10/2015	N	Y	1/13/2016	Old septic tank is collapsing and needs to be properly abandoned. House served by sewer since 1978. **1/13/2016 - EH staff verified tank hole has been backfilled.**	
11/19/2015	102 Hardscrabble Ln	No Subsurface Operator	12/19/2015	N	Y	1/13/2016	EH has not received system management reports as required by rule. **Management reports received by EH**	
11/25/2015	518 Pleasant	Surfacing Effluent & Unpermitted Repair Work	12/26/2015	N	Y	1/13/2016	Failing Low Pressure Pipe system has been excavated without permit. **Repaired by Certified Septic Contractor.**	
12/21/2015	8405 NC HWY 751	Surfacing effluent	1/21/2016	N	Y	1/7/2016	Massive drainfield failure. Municipal sewer is available on the lot. **1/7/16- Drainline blockage removed by certified septic contractor.**	
3/26/2015	6903 Iron Gate	Surfacing effluent	4/27/2015	N	Y	12/16/2015	Surfacing effluent **12/16/2015 - NPDES System has been installed**	3/26/2015 - Non-repairable lot. Owner referred to NC DWR for NPDES permit. 10/13/2015 - NCDWR has issued an Authorization to Construct for a NPDES system (NCG551667).
12/10/2014	2612 Cooksbury	Sewer disconnection	1/10/2015	N	Y	12/7/2015	Sewer disconnected **12/7/2015 - City of Durham Public Works confirmed house is connected to sewer.**	4/20/2015 - House is unoccupied

10/28/2015	7728 Grace Cove Ln	No Subsurface Operator	11/27/2015	N	Y	12/7/2015	EH has not received system management reports as required by rule. **12/7/2015 - EH has received operation and maintenance reports from the Certified Operator.**	
5/5/2015	715 Hebron	Damaged septic tank	6/5/2015	N	Y	11/30/2015	Septic tank lid has collapsed. 5/19/2015 - Repair permit issued. ** Septic tank replaced**	
11/6/2014	2800 Ferrand	Surface Discharge of effluent & building addition over septic tanks	12/6/2014	N	Y	11/30/2015	Surface discharge of effluent. An unapproved two-story deck addition previously built over septic tanks. Lot is non-repairable, municipal sewer is available. **11/30/2015 - Parcel is connected to municipal sewer. Building Inspections has parcel condition on permit for subsurface analysis due to tank placement.**	2/25/2015-Property has been sold and acquired by a real estate company. Agent has stated they will pursue connection to municipal sewer. 6/2/2015 - Sewer installation is in progress, owner is consulting with Building Inspections for guidance on septic tank abandonment procedures. House remains unoccupied. 7/31/2015 - House is now connected to sewer, awaiting response from City/County Building Inspections regarding septic tank abandonments.
10/28/2015	8307 N Roxboro Rd	No Subsurface Operator	11/27/2015	N	Y	11/27/2015	Little River Community Complex - EH has not received system management reports as required by rule. **11/30/2015 - Report has been received by Environmental Health.**	
10/28/2015	9008 Quail Roost Rd	No Subsurface Operator	11/27/2015	N	Y	11/9/2015	Mangum Elementary School - EH has not received system management reports as required by rule. **11/9/2015-EH has received operation and maintenance reports from the Certified Operator.**	
10/28/2015	3103 Page Rd	No Subsurface Operator	11/27/2015	N	Y	10/30/2015	EH has not received system management reports as required by rule. **10/30/2015 - EH has received operation and maintenance reports from the Certified Operator.**	
10/28/2015	1002 Andrews Chapel	No Subsurface Operator	11/27/2015	N	Y	10/29/2015	EH has not received system management reports as required by rule. **10/29/2015 - Owner notified EH that mobile home was destroyed by fire. System not in use.**	
6/4/2015	4317 Kerley Rd	Surfacing effluent & property line setback violation	7/4/2015	N	Y	10/23/2015	Existing system crosses property line and is discharging effluent to the ground surface. **10/23/2015-New septic system installed.**	6/11/2015 - Repair application received by Environmental Health 6/18/2015 - Repair permit issued. House is unoccupied.

12/31/2014	4129 Guess Rd	Septic tank structurally unsound, building addition over septic tanks	1/31/2015	N	Y	10/22/2015	Heavy root intrusion in tank, deck footing on tank, probable unpermitted gravel conventional line added at some point, sand filter on property. Unoccupied house. Owner referred to NC Div of Water Resources for NPDES permit. **10/22/2015 - House is vacant and existing septic system has been properly abandoned.**	4/20/2015 - House remains unoccupied
2/12/2015	1302 Thompson	Effluent surfacing at start of drainfield	3/12/2015	N	Y	9/29/2015	Surfacing effluent **9/29/15 - Root blockage repaired in existing system**	8/20/2015 - EH staff contacted owner. Owner stated that she will proceed with hiring a septic contractor. 9/10/2015 - EH staff met with septic contractor onsite. Existing system is clogged with tree roots. Owner is cooperating with EH for evaluation of parcel for repair.
12/17/2014	5126 Leesville Rd	Collapsing septic tank	1/19/2015	N	Y	9/23/2015	Collapsed septic tank. Revised NOV 1/28/2015. House is unoccupied, existing system is non-repairable, owner referred to NC Div. of Water Resources for an NPDES permit. **9/23/2015 Property has changed ownership. New owner has obtained an Improvement Permit for pretreated subsurface drip irrigation.**	
8/19/2015	6703 Isham Chambers Rd	No Subsurface Operator	9/19/2015	N	Y	9/15/2015	EH has not received system management reports as required by rule. **9/15/2015 - Owner has contracted with a certified operator.**	
8/19/2015	8116 Willardville Station Rd	No Subsurface Operator	9/19/2015	N	Y	9/2/2015	EH has not received system management reports as required by rule. **9/2/2015 - Owner has contracted with a certified operator.**	
8/20/2015	203 Epperson	No Subsurface Operator	9/20/2015	N	Y	8/26/2015	EH has not received system management reports as required by rule. **8/26/2015 - Owner has contracted with a certified operator.**	
5/21/2015	209 Bacon	Collapsed Tank	6/21/2015	Y	Y	8/20/2015	Collapsed septic tank. NOV forwarded to County Attorney's office 8/14/2014. Has undergone change of ownership, no longer bank owned. **8/20/2015 - Septic tank lid was replaced by owner**	5/21/2015 - New NOV issued to current owner per guidance from County Attorney's Office. 7/14/2015 - EH contacted owner via telephone. Owner stated the original concrete lid for the tank is on the property and that he would reinstall it. EH staff will verify via site visit.

7/15/2015	3518 E. Geer St	Collapsed septic tank, property line setback violations	8/15/2015	N	N	8/4/2015	House is unoccupied. Existing tank has collapsed, NCOWCICB certified septic inspector report indicates illicit drain field installed across property lines, site has been classified Unsuitable for repair. Owners referred to NCDWR. **8/4/2015 - Septic tank has been properly abandoned and house is vacant**
1/2/2015	2714 Red Valley Dr	Surfacing effluent in 3rd line	2/2/2015	N	Y	7/22/2015	Repair permit issued 1/13/15, no contact from owner since **7/22/2015 - Plumbing leak was repaired and septic tank is properly sealed.**
5/27/2015	2903 Constance Ave	Surfacing effluent	6/27/2015	N	N/A	System not under DCoDPH Jurisdiction	Anonymous complaint received by EH regarding septic system failure at this address. System failure verified during site visit. **7/14/2015 - Staff discovered the system is a discharging sandfilter under NCDENR jurisdiction. NC Division of Water Resources was notified by letter.**
6/26/2015	2615 Joe Ellis Rd	Malfunctioning effluent pump	7/26/2015	N	Y	8/24/2015	Effluent pump is malfunctioning and needs to be replaced. **8/24/2015- Proper pump was installed, system repairs have been completed and Leaks corrected. System is functioning properly.
7/6/2015	325 Latta Rd	System Partially Destroyed	8/6/2015	N	Y	8/27/2015	System was partially destroyed by driveway construction. Repair permit for septic system issued same day as NOV. **8/27/2015- System repairs have been completed and confirmed by ENV HLTH. A pump final will follow but system has been properly installed/repaired.



Energy Drinks

Wanda Boone

Together for Resilient Youth (TRY)



VISION

Vision: Resilient Youth in a Healthy Drug Free Community

MISSION

Mission: TRY prevents substance abuse among youth and adults by reducing community risk factors through advocacy, education, mobilization and action.





Advisory Board

L'Tanya Gilchrist, District 1 Community Health Worker

Nancy Kneepkens, District 2 Facilitator

Mindy Solie, District 3 Member

Harold Chestnut District 4 & City-Wide

42 Active Members include:

Parents, Youth , Durham Public Schools/School Board, Sheriff' s Department, County Commissioners, City Council Members , Duke University Medical Center, Research Triangle Institute, Justice, Faith, Alliance Behavioral Health



Substance Abuse, Mental Health, Public Safety

Duke Chronic Pain Coordinator & Project Lazarus - Rx Prevention

Governor's Task Force on Education Gangs and Substance Use

Office of the Governor - Community Affairs (Prevention)

Mayor's Poverty Initiative - Public Safety Committee

Member Community Anti-Drug Coalitions of America

NC Preventing Underage Drinking Initiative

Member Durham County Crime Cabinet

North Carolina Central University Campus Community Coalition

Diversion Program Participant for 16 and 17 year olds

Health and Wellbeing

Office of the White House Faith and Community Partnerships for NC

Office of the Governor - Community Affairs

Mayor's Poverty Initiative - Health Committee

Chair Durham Committee on the Affairs of Black People

Member Obesity and Substance Abuse Subcommittee PHD

Duke Population Health Improvement Leadership Advisory Board,
Advisory Group for Duke Integrated Pediatric Mental Health Collaborative

Durham Public Schools Health Advisory Committee

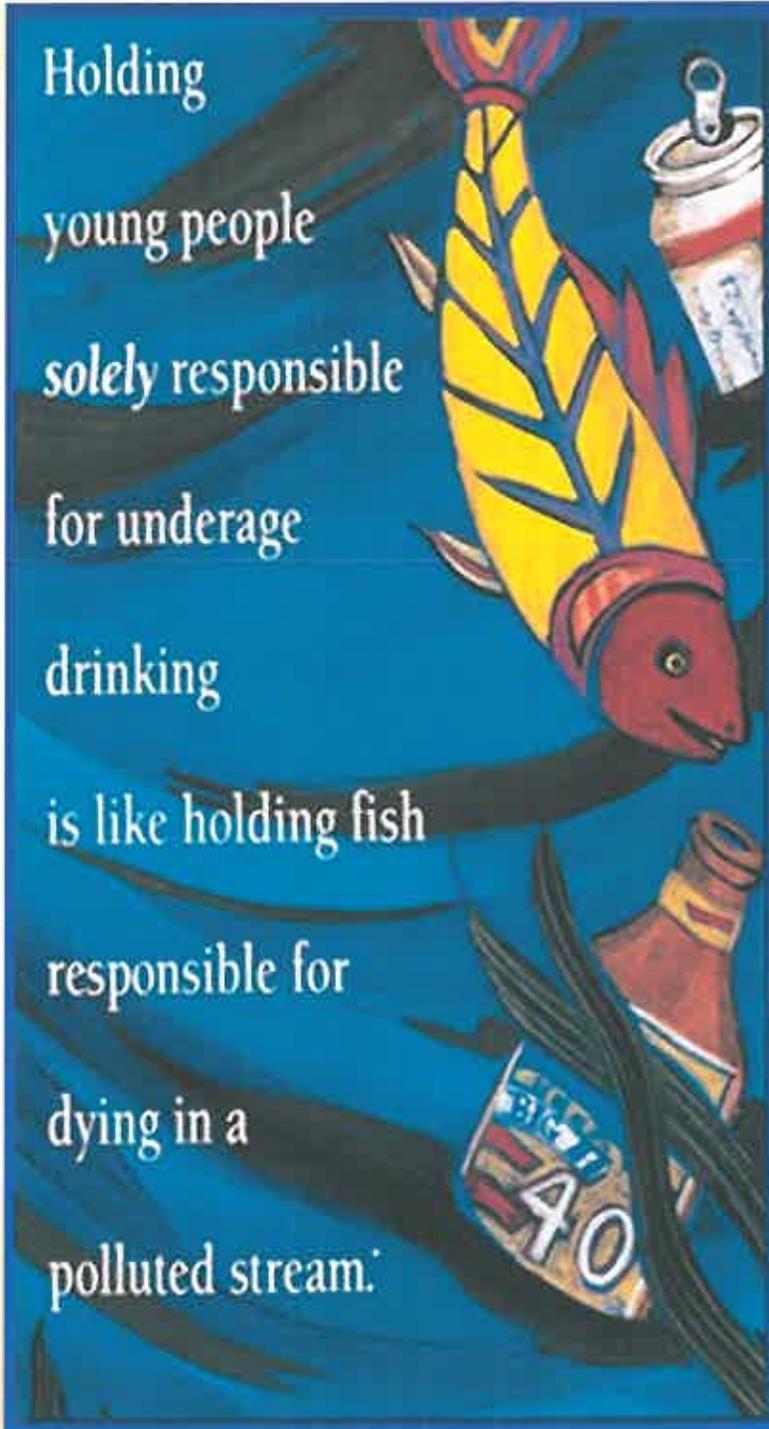
Member Northeast Central Durham Leadership Council

Duke Rethinking Pain Initiative

Durham Diabetes Coalition



Holding
young people
solely responsible
for underage
drinking
is like holding fish
responsible for
dying in a
polluted stream.



383 Brands with over 150 mg

Rage Inferno	24	375	15.6
Spike Energy Drink	16	350	21.9
Wired X344 Energy Drink	16	344	21.5
Stumptown Nitro Cold Brew	11	330	30.0
Redline Xtreme Energy Drink	8	316	39.5
BANG Energy Drink	16	300	18.8
Ripped Hardcore Liquid Energy Drink	11.16	300	26.9
SPIKE Shooter	8.4	300	35.7
Viso Energy Drink	20	300	15.0
Cocaine Energy Drink	8.4	280	33.3
Jolt Cola Energy Drink	23.5	280	11.9
Potencia Energy Drink	16	250	15.6
Redline Energy Drink	8	250	31.2
Redline Princess	8	250	31.2
Speed Stack Energy Drink	18	250	13.9
Blade Energy Drink	16	240	15.0
FMF Power Energy Drink	16	240	15.0
Fuel Energy Drink	16	240	15.0
Mega Monster Energy Drink	24	240	10.0
Rockstar Iced Energy Drink	16	240	15.0
Rockstar Perfect Berry	16	240	15.0
Rockstar Punched	16	240	15.0
Rockstar Pure Zero Energy Drink	16	240	15.0
Rockstar Revolt Energy Drink	16	240	15.0
Rockstar Super Sour	16	240	15.0
Rockstar XDurance Energy Drink	16	240	15.0
Rockstar Zero Carb	16	240	15.0
Spider Energy Drink	16	240	15.0
Vamp Energy Drink	16	240	15.0
Berzerk Energy Drink	16	225	14.1
Octane Energy Drink	12	225	18.8
Rockstar Hachata Energy Drink	15	225	15.0
Canadian Big Buzz Green Machine Energy	16	224	14.0
NOS Active Sports Drink	22	221	10.0
Rockstar Roasted	15	220	14.7
SLAP Energy Drink	16	220	13.8
Acute Fruit Energy Drink	15.5	213	13.7
Power Trip Energy Drink	16	210	13.1
Bulldog Buzz	11.84	204	17.2
Brawndo Energy Drink	16	200	12.5
BuzzWater	16.9	200	11.8
Celsius Energy Drink	12	200	16.7
Energy-ZING Shake by Nutrisystem	8	200	25.0
Extreme Thermo Rush	20	200	10.0
Frava Caffeinated Juice	16	200	12.5
Hijinks Energy Mixer	1.1	200	181.8
Jump Start Energy Drink	16	200	12.5
Liquid Lightning	16	200	12.5
Pure Kick Energy Drink	20	200	10.0
Rage Liquid Energy	16	200	12.5
Ripped Force Energy Drink	18	200	11.1
TAPOUT Energy Drink	16	200	12.5
Whoop Ass Energy Drink	16	200	12.5
Xtreme Shock Energy Drink	12	200	16.7
Zija XM+ Energy Drink	12	200	16.7
ZizZazz Energy Drink	16	200	12.5
ZUM XR Energy Drink	16	200	12.5
Hydrite Extra Power	15.5	195	12.6
Crunk Energy Drink	16	192	12.0
Powerhink Energy Drink	16	190	11.9
AZ Energy Drink	15	188	12.5
Love Monster	15	188	12.5
Wind X 3000 Energy Drink	16	188	11.8
Speed Energy Drink	16	186	11.6
No Fear Energy Drink	16	182	11.4
Neutron Energy Drink	16	180	11.2
Rockstar Energy Water	20	180	9.0
Stalk'd Caffeine Mixer	1	180	180.0
Xtasy Energy Drink	12	180	15.0
Monster Import	18.6	179	9.6
Xyience Energy Drink	16	176	11.0
Pure Cofein 699	8.46	175	20.7
Talon Energy Drink	16	174	10.9
Vixen Energy Drink	16	174	10.9
Chitron Energy Drink	16	170	10.6
DNA Energy Drink	16	170	10.6
Helix Energy Drink	16	170	10.6
Morning Spark Energy Drink	16.9	170	10.1
Rumba Energy Juice	16	170	10.6
Big Jolt Energy Drink	16	164	10.2
Go Fast Coconut	16	162	10.1
Monster Rehab Energy Drink	15.5	161	10.4
Roaring Lion Energy Drink	16.9	161	9.5
Ace Energy Drink	16	160	10.0
Amp Energy Cherry Blast	18	160	10.0
Arma Energy Drink	16	160	10.0
Burn Energy Drink	16.91	160	9.5
ColMotions	8.4	160	19.0
Curve Energy Drink	16	160	10.0
Deason Energy Drink	16.91	160	9.5
Diablo Loco Energy Drink	16	160	10.0
ED Energy Drink	16.9	160	9.5
Electric Monkey Wild Energy Drink	16	160	10.0
Full Throttle Energy Drink	16	160	10.0
Hard Rock Energy Drink	16	160	10.0
Hi Ball Energy Drink	16	160	10.0
Howling Monkey Energy Drink	16	160	10.0
Hydrite Energy Water	15.5	160	10.3
lak	16.91	160	9.5
King 888 Energy Drink	16	160	10.0
Knockout Energy Drink	16	160	10.0
Lost Energy Drink	16	160	10.0
Monster Assault	16	160	10.0
Monster Cuba Lina	16	160	10.0
Monster DUB	16	160	10.0
Monster Energy Drink	16	160	10.0
Monster Extra Strength	12	160	13.3
Monster M3 Energy Drink	5	160	32.0
Monster Mxod Energy Drink	16	160	10.0
Monster Ripper	16.91	160	9.5
Monster The Doctor Energy Drink	16.91	160	9.5
Mother Energy Drink	16.91	160	9.5
Mother Inferno	16.91	160	9.5
NOS Energy Drink	16	160	10.0
NOS Energy Drink (New Zealand Brand)	19.21	160	8.3
NOS Loaded Cherry	16	160	10.0
OX Energy Drink	16.9	160	9.5
OJ Clary Energy Drink	16	160	10.0
Plasma Energy Drink	16	160	10.0
Power Edge Energy Drink Mix	16	160	10.0
Ram Jam Energy Drink	16	160	10.0
Red Devil Energy Drink	16	160	10.0
Relentless Energy Drink	16.9	160	9.5
Rip It Energy Drink	16	160	10.0
Rockstar Boom!	16	160	10.0
Rockstar Sparkling Energy	16	160	10.0
Rockstar Sport Energy Shake	15	160	10.7
TEHO Energy Drink	16.9	160	9.5
Ubermonster Energy Brew	16.91	160	9.5
Yemom Black Mamba	16	160	10.0
Yemom Death Adder	16	160	10.0
Yemom Killer Tapan	16	160	10.0
Yemom Mojave Rattler	16	160	10.0
Yaka Functional Drinks	16	160	10.0
Warrior Energy Drink	16	160	10.0
Amp Energy Zero	16	157	9.8
Amp Passion Fruit	16	156	9.8
Amp Strawberry Limeade	16	156	9.8
Muscle Monster	15	156	10.4
Radioactive Energy Drink	16	156	9.8
Max Velocity Energy Drink	16	155	9.7
Monster Rehab Green Tea	15.5	155	10.0
Wicked Energy Drink	16.9	155	9.2
Xingtea Green Tea Energy	23.5	155	6.6
Monster Kaons	16	154	9.6
Monster Ultra Citron	16	152	9.5
Monster Ultra Sunrise	16	151	9.4
Rockstar (NZ / Aus)	16	151	9.4
G Fuel Energy Drink Mix	12	150	12.5
Hawaiian Oa Sparkling Energy	11.5	150	13.0
Joker Kadi Energy	16	150	9.4
Positive Charge Energy Drink	16.5	150	9.1
Positive Energy Juice	10	150	15.0
Trader Joe's Energy Drink	16	150	9.4
Vital Energy Drink	20	150	7.5
Whey Up Energy Drink	16	150	9.4
Arizona Caution Energy Drink	11.5	144	12.5
Battery Juiced Energy Drink	15	144	9.6
Amp Energy Drink	16	142	8.9
Caffeine Energy Drink	12	140	11.7
Guru Energy Drink	12	140	11.7
Monster Abuseably Zero	16	140	8.8
Monster Lo-Carb	16	140	8.8
Monster Pink Energy Drink	16	140	8.8
Monster Ultra Energy Drink	16	140	8.8
Quad Energy Drink	16	140	8.8
NeuroFuel Energy Drink	12	128	10.6
Arize Caffeinated Water	16.9	125	7.4
Topplez Cafe 125	8	125	15.6
Vibration Enhanced Water	20	125	6.2
Advocate Slim	8	120	15.0
Arizona Natural Energy	15.5	120	7.7
Bang Energy Drink	12	120	10.0
Chasing Rabbits Energy Drink	12	120	10.0
Duff Energy Drink	12	120	10.0
Go Fast Energy Drink	11.9	120	10.1
Great Value Energy Drink Mix	16	120	7.5
Hi Ball Energy Coffee	8	120	15.0
Lift Energy Stick	8	120	15.0
Mario Power Up Energy Drink	8.4	120	14.3
MusclePharm Energy Drink	12	120	10.0
Novel Energy Drink	12	120	10.0
Rocky Mountain High Energy Drink	12	120	10.0
Rockstar Caffeinated Fire Root Beer	12	120	10.0
Ruso Clean Energy Drink	8.46	120	14.2
Spark Energy Drink	8	120	15.0
T-Virus Antidote	8.45	120	14.2
USANA Rev3 Energy Drink	12	120	10.0
Falser Energy Drink	12.52	118	9.4
Hot Pure Energy Drink	12	114	9.5
Red Bull Cherry Edition	12	114	9.5
Red Bull Orange Edition	12	114	9.5
Red Bull Yellow Edition	12	114	9.5
Reaver Buzz Energy Drink	8.3	110	13.3



Mega Monster Energy Drink

Mega Monster Energy Drink is Monster Energy's extra large size can.

A regular can of Monster has 2 servings, where as a Mega Monster has 3 servings per can.

Since each 8 fl.oz. serving of Monster's standard energy drink has 80mg of caffeine and 27 grams of sugar, this puts Mega at 240mg of caffeine and 81grams of sugar.



The DAWN Report

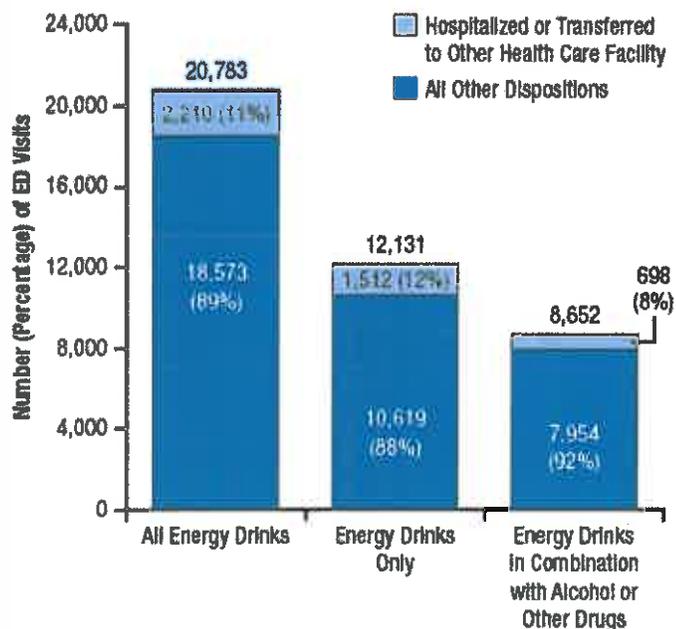
Data Spotlight

March 13, 2014



1 in 10 Energy Drink-Related Emergency Department Visits Results in Hospitalization

Disposition of Emergency Department (ED) Visits Involving Energy Drinks among Patients Aged 12 or Older: 2011



Note: The category "All Other Dispositions" includes: treated and released, left against medical advice, died, other, and undocumented. No ED visits involving energy drinks resulted in death.

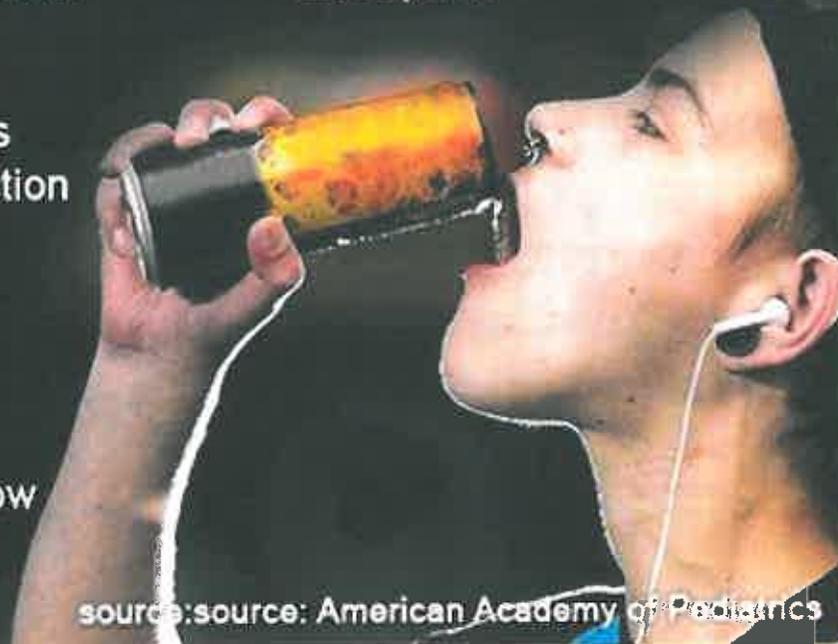


HEALTH EFFECTS OF ENERGY DRINKS

on Children, Adolescents and Young Adults

Overconsumption of energy drinks may lead to the following outcomes:

- Increased sweat excretion
- Affected blood pressure
- Psychotic conditions
- Liver damage
- Respiratory disorders
- Seizures
- Rhabdomyolysis
- Heart palpitations
- Myocardial infarction
- Tachycardia
- Hypertension
- Nausea
- Vomiting
- Abdominal pain
- Increase urine flow
- Kidney failure
- Agitation
- Coronary vasoconstriction
- Cerebral vasoconstriction
- Altered electrolyte levels
- Interferes with calcium absorption



source:source: American Academy of Pediatrics





18 years of age or older

The American Academy of Pediatrics says that energy drinks “are never appropriate for children and adolescents” since caffeine consumption may harm kids’ developing neurological and cardiovascular systems. The American Medical Association has also called on energy drink manufacturers to stop marketing their products to people under the age of 18, citing the health risks of caffeine and other ingredients like taurine and l-carnitine, both naturally occurring amino acids.





QUESTIONS?