MEETING MINUTES
Tulsa City-County Board of Health
August 17, 2022 at 6:00pm
North Regional Health Wellness Center
5635 Martin Luther King Jr. Blvd.
Tulsa, OK 74126

Board Members Present:
Regina Lewis, D.O; Vice-Chair
Aimee Boyer, J.D., CFP; Treasurer
Sarah-Anne Schumann, MD, MPH
Krystal Reyes, MPA
Mike Jones, DVM
Ann Paul, DrPH
Jeffrey Galles, D.O.
Mousumi Som, D.O

Staff Present:
Bruce Dart, PhD, Executive Director
Reggie Ivey, Chief Operating Officer
Chanteau Orr, Legal Counsel
Scott Buffington, Employee Resources & Development
Monica Rogers, PhD, Data & Technology
Priscilla Haynes, Preventative Health
Leanne Stephens, Marketing & Communication
Kelly VanBuskirk, Prevention, Preparedness and Response
Jumao Wang, Finance Department
Adam Austin, Environmental Health
Marcus Anderson, Adolescent and Child Health Services
Makeda Thompson, Executive Assistant
I. Call to Order and Welcome
Dr. Regina Lewis called the meeting to order at 6:05 pm.
The meeting notice and agenda were posted at the James Goodwin Health Center, the
North Regional Health and Wellness Center, and the Tulsa City-County Health Department
(THD) website, and emailed to the Tulsa County Clerk, the Tulsa City Clerk, and the Tulsa
City-County Library on August 12, 2022.

Approval of the Meeting Minutes
Dr. Regina Lewis entertained a motion to approve the June 29, 2022 minutes. A
motion was made by Aimee Boyer and seconded by Dr. Jeffrey Galles. The June
29, 2022 minutes were approved:

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<tr>
<td>Dr. Stout</td>
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<tr>
<td>Dr. Lewis</td>
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<td>Dr. Schumann</td>
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<td>Ms. Boyer</td>
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<td>Dr. Jones</td>
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<td>Dr. Paul</td>
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<td>Ms. Reyes</td>
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<td>Dr. Som</td>
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<td>Dr. Galles</td>
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II. Chair's Report: Dr. Mike Stout-
A report was not reported.

III. Director's Report
Dr. Bruce Dart stated that they just submitted their grant to CDC, and it's a non-competitive grant,
and the Tulsa Health Department was one of the few communities qualified for the 8.5-million-
dollar grant. And it would be geared toward data modernization, workforce development, policy,
and systems. Decreased numbers for the last three weeks in COVID-19 reports this week. It was
almost three hundred less than last week. The OU wastewater surveillance found cryptic linage of
DELTA in South Tulsa. Cryptic means the same but different. The Tulsa Health Department is
waiting to see if it will be a problem. They were testing for MonkeyPox in Tulsa wastewater. There
have been some positive cases of MonkeyPox in Oklahoma. THD is supplying vaccines to the
priority groups for MonkeyPox because THD does not have enough for the general public yet.
IV. THD Reports/Action Items

A. Public Health Threat: COVID-19 Update

Priscilla Haynes showed a slide that showed all the new COVID cases in Oklahoma and Tulsa. On July 6, 2022, there were 7,570 cases in Oklahoma and 1,552 cases in Tulsa, OK. On July 13, 2022, there were 8,449 cases in Oklahoma and 1,662 new cases in Tulsa. On July 20, 2022, there were 9,561 cases; in Tulsa, OK, there were 1,772 new cases; on July 27, 2022, there were 10,373 cases in Oklahoma and 1,854 cases in Tulsa. On August 03, 2022, there were 9,602 new cases in Oklahoma and 1,854 cases in Tulsa. On August 10, 2022, there were 9,364 new cases in Oklahoma and 1,573 cases in Tulsa, OK. She also shared the link to the OSDH Weekly Epidemiology & Surveillance Report https://oklahoma.gov/covid19/newsroom/weekly-epidemiology-and-surveillance-report.html and the Tulsa county COVID-19 Data on the coronavirus disease https://www.tulsa-health.org/coronavirus-disease-2019-covid-19/tulsa-county-covid-19-data.

She discussed the number of employees at THD that have tested positive for COVID-19. The slide showed started from January 2022, when THD had the highest number of employees with COVID-19 was seventy. In February, there were nineteen employees; in March 2022, there were six employees; in April 2022, there were five employees. In May 2022, there were seven employees; in June 2022, there were nine employees. In July, there were 25 employees, and as of August 17, 2022, there are six employees. The COVID-19 recommendations for vaccinations. An individual is fully vaccinated two weeks after the final dose in the primary series. And the up-to-date means that the individual has received all boosters recommended for that person when eligible. It means different things for different people; if you are under 50, that is just one booster; if you are not moderately to severely immunocompromised, it’s just one booster. If you are over the age of 50 and if you have moderate to severely immunocompromised systems, you may have additional recommendations for additional boosters.

The Novavax is a two-dose in the primary series, given 3-8 weeks apart. If you are moderately to severely immunocompromised, you should receive two doses; three weeks apart. And it has not been approved yet for a 3rd primary dose. It is approved for individuals that are 18 years old and older. It has not been approved for a booster shot. It is a protein subunit. It differs from the Pfizer and Moderna vaccines because they are mRNA vaccines. The Novavax is available at THD. The side effects of the Novavax are pain, redness, swelling, tiredness, headache, muscle pain, chills, fever, and nausea. Employees have access to at-home rapid tests. They are in the break rooms at CRHC, JGHC, and NRHWC https://www.cdc.gov/coronavirus/2019-ncov/testing/self-testing.html#print. Self-tests, along with vaccination, wearing a well-fitted mask, and physical distancing, help protect you and others by reducing the chances of spreading COVID-19.

Priscilla also talked about when an individual should take a test for COVID-19, which is if the individual is displaying symptoms at least five days after exposure and if you test negative for COVID-19, consider testing again 1 to 2 days after your first test. If your test comes back positive,
stay home and isolate yourself from others in your home. And if you are going to an indoor event or a gathering, immediately before the gathering. Or as close to the time of the event as possible. Wear a well-fitted mask when around others and watch for symptoms. If you have any emergency warning signs, seek emergency care immediately. And talk with your healthcare provider if symptoms worsen.

B. Public Health Threat: MonkeyPox Virus

Kelly VanBuskirk discussed the current outbreak of MonkeyPox. In early May, The U.K. reported an infected index case while traveling to Nigeria. Since then, more cases were identified within the U.K. that did not report travel history and were not geographically linked to other cases indicating community transmission. In Mid May, additional countries reported cases of MonkeyPox (MPX). On May 18, the United States confirmed its first case in Massachusetts. In July 2022, the World Health Organization announced MPX, a P.H. emergency of international concern. On August 4, 2022, the U.S. declared MPX a public health emergency. There are 38,000 cases, and a majority of the cases that historically have not reported monkeypox. Forty-nine states in the U.S. and D.C., as well as Puerto Rico, have cases amounting to over 12,698. There are no cases in Wyoming; some cases are not linked to travel, which indicates community spread. Most cases have not been severely ill, and no deaths have been reported in the U.S.

In Oklahoma, there are 15 cases, and there have been ongoing case investigations and monitoring as well as contact tracing and monitoring, Sample collection, and educating people about Monkeypox and MPX vaccinations. JYNNEOS is the name of the MonkeyPox vaccine. It is one dose per vial, two-dose series 28 days apart, and it’s a subcutaneous injection. The people eligible for the vaccine are people in known contact with someone who has monkeypox or identified; the authorities, for example, through case investigation or contact tracing. People who are aware that a recent sex partner within the past 14 days was diagnosed with monkeypox. Certain gay, bisexual, or other men who have sex with men, or transgender people, who have had any of the following within the past 14 days such as sex with multiple partners (group sex) or sex at a commercial sex venue, or sex in association with an event, venue, or defined geographic area where monkeypox transmission is occurring is eligible for the vaccine.

C. Community Health Improvement Plan: Modernizing Client Feedback

Dr. Leslie Carroll discussed the Center for Community Health and the partnership with St. Francais Health System. She stated that on July 2019, a grant was received for $1,578,000. In December of 2019, it launched a 12-month program focused on five North Tulsa zip codes, offered at Morton, and in July 2020, the program was modified to 30 days offered to all of Tulsa County at Saint Francis Health System. She showed a chart with the original budget for 2019, which was $466,967.66; the total expenses were $182,242.57, and the remaining balance was $1,395,749.21. In 2020 the original budget was $559,361.91, total expenses $169,865.28 and the balance was $1,225,833.93 in 2021 the original budget was $551,661.91 and the total expense was $234,558.30 leaving a balance of $991,525.73.
The Center for Community Health’s goal is to provide comprehensive case management for SFHS patients post-discharge and promote overall health and self-sufficiency. They are maintaining a monthly average of 30 new patients, a monthly average rate of 2 referrals, and an average rate of 2 contacts. They also want to decrease emergency room visits and hospitalizations by improving utilization of the medical home, reducing ER, IP, OP, and UC visits, increasing PCP follow-up visits, and reducing medical costs. The goals and strategies of the Center for Community Health are to provide comprehensive case management for SFHS patients post-discharge and promote overall health and self-sufficiency. Design a 30-day program, Generate a program protocol and procedures manual and modify it as needed with training, recruitment, and evaluation. Develop a database to capture patient volume, contacts, and referrals, employ two full-time, enroll 720 patients/year and report to the Saint Francis Health System leadership team monthly.

Decrease emergency room visits and hospitalizations by improving utilization of the medical home. Saint Francis Health system case management and THD Program Director will work together to provide a seamless hand-off in Design CHW workflow to synchronize with SFHS floor teams' care management for patients. Develop referral process with SFHS Case Manager Director, Educate SFHS case managers of CCH program services and referral process. The efforts will include hospital visits to enroll and assess needs and home visits to deliver additional services. Weekly phone calls throughout the -day readmission span, ensure patients are connected, referral loops are closed, and create patient summaries for SFHS case management. The eligibility criteria and demographics need to reside in Tulsa County, be a complex patient with co-morbidities and chronic diseases, speak English, Spanish, and Burmese, be 18 years old or older, and not be pregnant or terminally ill.

She talked about how the program has been a great success and showed a slide stating that 378 clients were enrolled, 557 conversations were had with case managers, 546 hospital visits were made, 792 phone conversations were had, and 1315 referrals were made. In the program outcomes from 2021 to May 2022, patients who were enrolled in the CCH program showed a reduction in all negatively associated visits and an increase in the positively associated visits when comparing 90 days pre-program and 90 days post-program. The return of investment equals 3.54:1. The cost savings was $510,681, and the Net income was $717,035, which equals $1,227,716. And the program costs $346,820.57.

D. Emerging Issues: Health Equity Committee

Krystal Reyes shared that the Health Equity Committee met on August 3, 2022, and they invited Kandy Whitley-White, the Health Equity Director, and Christina Seymour, the project manager of C.H.I.P., to join, and it was a great conversation. The Health Equity committee contacted Dr. Bruce Dart and Reggie Ivey to schedule the Intercultural Development Inventory bias training. Krystal said they are consulting with a consultant from O.S.U. They’re still considering looking at the Racial Equity Institute training, which would be an excellent shared analysis training
on equity issues and policy. It would be great to have it before the Strategic Planning process starts for the Tulsa Health Department.

Announcements

Next Board Meeting Wednesday, September 21, 2022 at 6:00pm I JGHC Room 200

V. Adjournment

The meeting adjourned at 7:48pm.

APPROVED:

\[Signature\]
Dr. Mike Stout, Board of Health Chair

ATTESTED:

\[Signature\]
Makeda Thompson, Tulsa Health Department Assistant