MEETING CALLED TO ORDER.
President Thomas called the meeting to order at 5:31 p.m. and asked all participants to identify themselves for the record (see above). He declared that a quorum was present, that notice of this meeting was posted on the Board of Health website, and that the call-in information was included to allow for public participation. This meeting was held in hybrid-fashion with members of the board and staff meeting in-person and members of the public attending online to test the hybrid-capabilities of the on-site meeting space.

ITEM 1. Public Comments (on unscheduled agenda items).
Members of the public expressed concerns for BCPH’s response to COVID-19 and asked for more information regarding the focus groups that were conducted during the spring of 2022.
ITEM 2. Approval of Meeting Minutes.
Board Member Harrison made a motion, which was seconded by Board Member Hinman, to approve the September 12, 2022, Regular Board of Health minutes. With all Board Members present in favor of the motion, President Thomas declared the motion unanimously carried.

Katherine Palmer provided that the Budget Study Session has been rescheduled for Wednesday, November 2nd. Since the decision to move the Budget Study Session to a later date, the Administration and Finance Team have had the ability to finalize internal grant budget planning templates, updated aspects of personnel finance, and reviewed and updated indirect rates that impact the overall budget. Further, the team has been able to work with the county’s Office of Financial Management to ensure that position records are aligned with the approved and updated compensation components that the county recently made for 2023.

Interim-Executive Director Nolen and Dr. Belknap presented the current trends that are seen in the public health workforce across the country, at the state-level, and local-level, and also provided insights into the challenges that the public health workforce is facing and will continue to face in the future.

Nationally, the public health workforce will need to increase by roughly 80% (or 250,000+ employees) in order to meet the core public health needs of communities. This translated to Boulder County would equate to roughly an additional 84 full-time-equivalent (FTE) staff. Further, inadequate and unpredictable funding sources has continued to place challenges on the public health workforce. The lack of sustainable funding has resulted in local public health agencies (LPHAs) to compete for funding from various sources, which results in differences in services being offered across the state and country. Public health emergencies, such as West Nile Virus, H1N1, Ebola, COVID-19, Marshall and Middlefork Fires, and Monkeypox have received emergency funding sources, but these sources are temporary, reactive, and inflexible. Potential solutions for this inflexible spending would be to increase the funding at the state-level as emergency management funds in place that can be used in an ongoing basis.

Nationally, one in three public health staff are considering leaving the field in the next year, and one in two are planning to leave in the next five years. A large contributor to these statistics is the aging workforce that are nearing retirement. There are roughly 30 BCPH staff that are at or near 20 years of service year mark for the Colorado Public Employment Retirement Association and they are able to retire if they choose.
In addition to public health staff reaching the ability to retire, those that are not at that point have multiple workforce drivers that could “push” them to leave the field. These potential influences include, pay equity, workload and burnout, lack of opportunities for advancement, stress, and organizational climate and culture. Further, it has been found that mental health is a large factor in employees’ willingness and ability to stay within the public health field. In a national survey, 56% of public health workforce reported at least one symptom of Post-Traumatic Stress Disorder (PTSD), and 20% reported that their mental health was poor or fair.

BCPH is in the process of conducting a workforce study to analyze the current state of emergency response preparedness, specifically looking at our structural and staffing capacity; future areas for agency growth; increase of program effectiveness for community impact; career advancement initiatives to advance staff development; and to complete a compensation and pay equity analysis.

Interim-Executive Director Nolen and Dr. Belknap opened the presentation for questions and discussion:

- Board Member Hinman asked if BCPH has considered the use of a contract- or volunteer-based workforce to help with high-priority areas?
  - Interim-Executive Director Nolen noted that the alignment of the workforce study with the strategic planning process will align, so that priorities can be recognized and built into the multi-year plan. Further, included within the scope of work for the workforce study is the ability to analyze the current and future state of staff capacity to address the core needs for public health, and also the spaces such as emergency management and additional priorities.

- Board Member Harrison asked if the reduction in funding for public health agencies across the country was due to the creation of other agencies or outsourcing to private industries?
  - Interim-Executive Director noted that while she does not have a direct answer, resources are often prioritized for treatment side of health, as opposed to the prevention-side where public health focuses.

- Vice President McMillan asked to confirm the increase in state per capita funds for LPHAs in the previous legislative session.
  - Interim-Executive Director Nolen noted that funding was increased for three years, but the first year had a large number of restrictions on how to use the funding as it was tied to ARPA funds. There are two years remaining with the additional funding approved by the legislature; if the legislature does not step in and change the language, the funding will continue.

- Vice President McMillan asked if there was any information related to the incoming workforce trends?
Interim-Executive Director Nolen noted that she does not have any current data but has heard through meetings with partners that there is increased enthusiasm for public health careers, including among students.

- Board Member Harrison asked if there is any information regarding the staff that are not retiring, but are still leaving public health, specifically where are they going? Further, are staff gaining experience within LPHAs and then leaving to serve in other agencies or at multiple agencies as a consultant?
  - Interim-Executive Director Nolen noted that she would have to gather specific information, but provided that some staff are leaving BCPH for other public health departments or other county departments. Kelli Hintch provided that the majority of staff that have left the Strategic Initiatives Branch have found work that is less demanding and pay more to account for the increased cost of living.

- President Thomas asked if the compensation analysis will only look at longer-tenured BCPH staff compared to newly hired staff?
  - Interim-Executive Director Nolen noted that this is a focus of the analysis since there are differences in pay for similar positions across the agency. Further, Boulder County implemented pay bands for position classifications that provide guidance on the pay structure for positions that fall within each band, and it is a goal that BCPH positions will be aligned within this framework to align pay with other departments and also compared to the market.

- President Thomas asked how the workforce study and additional county compensations will impact programs and staff that are grant-funded?
  - Interim-Executive Director Nolen noted that as we work to ensure that all staff are receiving equitable compensations, we will also work with grant funders to accommodate higher salary needs so that those costs are absorbed in grants.

**ITEM 5. Program Spotlight: Vector Control.**

Interim-Executive Director Nolen introduced Lane Drager to present on the Mosquito Control District and the Vector Control programs.

The Environmental Health Division administers the Mosquito Control Program on behalf of the Boulder County Board of County Commissioners. The structure and funding for the program is through a property tax assessment, so every four years the program assesses its funding and staffing needs in order to complete the work. The district boundaries include North: Boulder/Larimer County Line; South: Eldorado Springs/ Marshall/Superior; East: Boulder/Weld County Line; and West: Foothills/Highway 36. The program is focused mainly on larval control within the district, but also completes adult surveillance to track diseases carried by mosquitoes, like the West Nile Virus.

Lane Drager opened the presentation for questions and discussion:
• Board Member Harrison asked if there have been any shifts in the species that are present in Boulder County?
  o Lane noted that the majority of diseases carried by mosquitos are not found in Boulder County, but more in the tropical regions of the world. With the increasing worry of climate change, there is a potential for mosquitos in Boulder County and Colorado to contract and carry other diseases that are not typically found here.
• Board Member Hinman asked if there is any data on the rate of mosquito-related diseases found in animals?
  o Lane provided that the data on animal diseases will be covered in the next presentation, and also that it is difficult to capture the true rate of mosquito diseases in animals due to the rate/cost of tracking, testing, and treating.
• Board Member Harrison asked if there is a need to lengthen the period of mosquito control?
  o Lane noted that the previous mosquito control period originally ended in August, but now it is lengthened to end well into September to account for the shifts in climate change. If the season continues to be longer, then there will be an increase in the rate of human infections. The purpose of the program is not to eradicate mosquitos but to manage them to a controllable level.
• Vice President McMillan asked if the surrounding municipalities follow the same interventions that this program utilizes?
  o Lane noted that the majority do, but that the City of Boulder uses their own method and protocols. The City of Boulder does not do any adult control, so they rely on educating the community on the risk of diseases carried by mosquitos. Further, a challenge within the City of Boulder is the large amount of protected open space that the city owns. This land experiences flooding and irrigation, which leads to an increase in mosquito presence.
  o President Thomas asked if the decision was based on surveys of the community?
    ▪ Lane was unable to speak to the decision but does know that the Open Space Board for the city is supportive of the methods.

Lane continued the presentation on the Vector Control Program.

The major diseases that the Vector Control Program monitors are Plague, Tularemia, West Nile Virus, Rabies, and Hantavirus, which are diseases that animals and insects transmit to humans. Plague is spread by a bite from an infected flea, which can be a risk to pets, and are commonly carried by fleas on rodents and lagomorphs. Tularemia is a rare disease spread by a bite from an infected tick or deer fly, and is most commonly found in rabbits and other small mammals. West Nile Virus is a disease commonly found in birds that is spread to humans by mosquito bites. Rabies is the most significant vector disease that the team monitors. Rabies is spread through a
bite or saliva transmission, and in some cases a scratch can be a risk, from an animal infected with rabies. Hantavirus is a rare disease that is spread by contact with rodent urine or droppings. The data through week 38 of 2022 reported 208 rabies investigations, with 109 of these resulting in samples being submitted for testing, and 13 returned positive for rabies. There have been five plague and tularemia samples submitted, with no positive cases. No hantavirus samples have been submitted.

- Board Member Hinman asked if an investigation is triggered by someone calling BCPH to report an animal acting odd?
  - Lane noted that it is one of the ways. Animal Control is one of the largest partners for this program, and they are often the main ones to respond when a call is made. If an animal is present and captured, Animal Control then brings the specimen to BCPH for processing before being submitted for testing.

- Vice President McMillan asked if Lyme’s disease is present in our community?
  - Lane noted that it is not commonly found here, but it is on the team’s radar since it is the largest vector disease in the United States. The geographic spread of the disease is rapidly moving west, but the Colorado region is still dry enough that it is not present. There have been a few anecdotal reports of it in pets, but no confirmed human case in the state.

Continued data through week 38 of 2022 reported 61 West Nile Virus mosquito pools have been tested and 42.4% were positive. Colorado Department of Public Health and Environment (CDPHE) reported 135 human cases, with 28 of those cases in Boulder County.

- President Thomas asked if the mosquito control district is funded through property taxes, which only funds the contractor services and not staff?
  - Lane confirmed that it is funded through property taxes. Part of a full-time equivalent (FTE) position is funded through these taxes, and then the program also hires a seasonal quality assurance position.

- Board Member Hinman asked how these funding issues can be addressed since the cost of treatment is much more expensive than that of prevention.
  - Lane agreed and noted that BCPH is not the only agency facing these issues. The majority of prevention is through pet vaccinations and general education.
  - Board Member Hinman noted that these priorities and trade-offs for services will be an important issue in the upcoming budget discussion. Interim-Executive Director Nolen agreed and noted that BCPH will continue to be intentional on funding priority programs that will be reflected in the strategic planning.
ITEM 6. Executive Director Recruitment Firm Approval.
President Thomas asked for a motion to approve the retention of the Merraine Group for the recruitment of the next BCPH Executive Director. Board Member Harrison moved to retain the Merraine Group, which was seconded by Vice President McMillan. With four out of five Board Members present voting in favor of the motion, President Thomas declared the motion carried.

ITEM 7. Director’s Report.
• Board Member Harrison asked if the county-wide mental and behavioral health strategic planning will be completed internally or through private and/or external partners.
  o Interim-Executive Director Nolen noted that the county-wide plan is the first time that public health has participated in this broader conversation. We have been partnering with other county agencies, and the process involves BCPH staff as well as community partners and contractors to support the process.
• Board Member Harrison asked if formula is cost controlled through the Women, Infants, and Children (WIC) program?
  o Daphne McCabe noted that formula is fairly cost-controlled within federal contracts each year, and having only one or two suppliers resulted in the formula shortage that was experienced in early 2022.
• Vice President McMillan asked for more information on universal pre-k and how the additional two-and-half hours of coverage after school for parents will be implemented.
  o Daphne agreed to provide more information (see response in November Director’s Report).
• Board Member Hinman asked if there are areas of emergency management that the team is specifically trying to rebuild or feel that they are behind on?
  o Interim-Executive Director Nolen noted that the team is trying to rebuild the agency’s incident command structure. Staff have been identified to fill roles and trainings will continue through the fall and into next year.

ITEM 8. Old and New Business.
• Interim-Executive Director Nolen thanked President Thomas and Vice President McMillan for attending BCPH’s Health Community Awards program.
• Interim-Executive Director Nolen and Daphne invited the board members to attend the Family Connects launch luncheon in Denver on October 21st.
There being nothing further to discuss, President Thomas declared the meeting adjourned at 7:32 p.m.

Gregg Thomas,  
President

Alexandra (Lexi) Nolen,  
Interim-Executive Director