

OFFICIAL RECORD OF PROCEEDINGS

Boulder County Board of Health Regular Meeting Online/Telephonic Meeting

October 16, 2023

The October Regularly Scheduled Board of Health Meeting has been rescheduled for October 16th, 2023, due to the Boulder County Board of County Commissioner's declaration of the 2nd Monday of October as a county holiday in observance of Indigenous People's Day.

BOH Members:

President Morgan McMillan; *Vice President* Landrey Fagan, M.D.; *Board Member* Amber Johnson;
Absent: Board Members Brooke Harrison, Ph.D., Lindy Hinman.

BCPH Staff:

Executive Director, Lexi Nolen; *Chief Medical Officer*, Bob Belknap, M.D.; *Deputy Director*, Indira Gujral; *Director of Administration and Finance*, Katherine Palmer; *Director of the Strategic Initiatives Branch*, Kelli Hintch; *Family Health Division Manager*, Daphne McCabe; *Environmental Health Division Manager*, Joe Malinowski; *Finance Manager*, Desiree Kazarosian; *Water Quality Program Manager*, Erin Dodge; *Water Quality Team Lead*, Celeste Gleason, *Environmental Health Specialist II*, Stephanie Fontanini; *Health Planning and Evaluation Manager*, Elise Waln; *Health Planner*, Rachel Mintle; *Mental and Behavioral Health Coordinator*, David LaRocca; *Business Operations Coordinator*, Jordan Thomas; *Administrative Specialist*, Dalia Mohamed.

Boulder County Staff:

Senior Assistant County Attorney, Kate Haywood

Guests:

Principal, CliftonLarsenAllen, LLP, Sam Hellwege
P.E. Church Onsite Wastewater Consultants, LLC, Kate Carney

Members of the Public who Provide Comment:

Marti Hopper
Carolyn Bninski

Meeting Called to Order.

Vice President Fagan called the meeting to order at 5:30 p.m. and asked all participants to identify themselves for the record (see above). She 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 related to BCPH's response to COVID-19, returning to in-person board meetings, and providing COVID-19 vaccinations to children.

ITEM 2. Approval of Meeting Minutes.

President McMillan made a motion, which was seconded by Board Member Johnson, to approve the September 11, 2023, Regular Board of Health minutes. With all Board Members present in favor of the motion, Vice President Fagan declared the motion unanimously carried.

ITEM 3. Personnel Announcements.

Lexi Nolen presented three personnel announcements for Boulder County Public Health (BCPH). The Boulder County Board of County Commissioners selected Dr. Amber Johnson as the newest Board of Health Member in August. Amber currently works at Colorado Perinatal Care Quality Collaborative as the Quality Improvement Lead. Additionally, she is a certified midwife with a focus on impacting healthcare, education, public policy, and quality improvement beyond direct patient care. Dr. Indira Gujral was selected as the Deputy Director for BCPH in September. Indira previously served as the Communicable Disease and Emergency Management Division Manager for 9 years, and provides a wealth of information and experience for BCPH. Lastly, Dr. Belknap, BCPH's Chief Medical Officer, has been appointed as the new Executive Director of the Public Health Institute at Denver Health.

ITEM 4. 2022 Audit Results.

Desiree Kazarosian introduced Sam Hellwege to present the 2022 Audit results. BCPH, along with the county more broadly, was delayed in meeting the County and State audit submission deadline of July 31, 2023. The Boulder Office of Financial Management requested an extension from the state for September 30, 2023, which was granted and met.

- President McMillan asked if there are internal controls in place to ensure a clean audit and future audit completion and submission prior to the deadline.
 - Desiree noted that while other county departments' audits are overseen by the county's Office of Financial Management, due to the BCPH being a separate business entity, BCPH must oversee our own audit. For the next audit, BCPH will be shadowing the Office of Financial Management to mirror county processes going forward, and will work to stagger budgeting and auditing work, which largely coincide on the calendar.

The 2022 audit did show one significant deficiency regarding internal control over Financial Reporting through the recording of accounts receivable that was not been received during the

period of availability after the year-end deadline of February 28th. Additionally, there were unavailable revenue recorded were there had been no accounts receivable, or revenue balances created.

ITEM 5. OWTS Variance Hearing.

Celeste Gleason introduced Stephanie Fontanini to present the Variance Hearing request for 603 Klondyke in Eldora (existing structure is a two-bedroom cabin). Based on CDPHE Regulation 43, the soil treatment area for the septic system is to be 100 feet from the well, and the variance request for this property is to locate the soil treatment area 75 feet from the onsite well. This variance would meet the minimum 100-foot requirement from any neighboring wells, but due to the small size of the property (less than ¼ acre) the 100-foot set back is not possible between the soil treatment area and the onsite well. The proposed new onsite wastewater treatment system includes the use of a high-level of treatment septic tank, Advantex AX20, which is sufficient for design flows up to 500 gallons per day, with a treatment level of TL3N. The treatment level includes a nitrogen reduction in the advanced treatment and then the horizontal set back between a soil treatment area and a well may be reduced to 75 feet when the diagonal distance to the base of the well grout is 100 feet. Alternatively, 'no closer than' may be used in combination with TL3N and a variance to reduce the required separation distance. At this site, the existing vault is 71 feet from the onsite well. Using TL3N, a variance may be granted for the soil treatment area to be no closer than this to the onsite well. A variance allowing a separation of 75 feet between the soil treatment area and the onsite well is requested.

The team identified two possible alternatives to the variance. The first would be to grout the existing onsite well, which was discussed with the well driller and was determined it was not possible. The second would be continued use of the vault, which would require the owners to have limited use of the cabin in the winter due to limited pumping access in winter conditions and increases the risk of the vault overflowing.

The team recommends the Board of Health to grant the variance request based on the following information: the neighboring wells meet the 100 foot setback to the soil treatment area; the regulations require an Operation and Maintenance Use Permit with BCPH, the proposed advanced treatment system (TL3N) will be an improvement from the existing vault and may reduce public health risk, and finally, the approval of the variance is supported by the Colorado Department of Public Health and Environment Onsite Wastewater Treatment System Coordinator.

- Vice President Fagan asked if there was ongoing testing of the water.
 - Celeste noted BCPH cannot require testing of the property's water since it is a private well. The property owners can choose to test the water, but it is not required.

- Joe Malinowski asked to clarify if the variance were approved, would this be included in the property's records for future owners to reference at the County's Planning and Permitting Office.
 - Celeste confirmed the property would be exempt from the Property Transfer Permitting process for five-years, but then if the property were to sell after five years the property owners would be required to ensure the Use Permit is up to date with BCPH.
- Kate Haywood also noted the Board of Health has the authority to issue site-specific conditions for the property after granting a variance, for example requiring testing. Additionally, the variance information will be listed on the property's deed for future buyer's reference.
- Vice President Fagan emphasized the importance of ensuring the water is suitable for the property if the variance is granted.
 - President McMillan does not want to impose testing requirements on the property owner unless the OWTS team deemed it necessary due to increased risk.
 - Celeste noted there are other properties in other locations that use the same proposed system and are not required to test, so it would place additional burden on the property owners requesting the variance.
 - Kate Carney confirmed there are no neighboring properties with advanced treatment systems, and if the proposed advance system indicated contamination of water, it would more than likely be from the neighboring non-advanced systems.
 - Joe asked if the property would be able to do an initial water testing before the system is installed to determine potability.
 - Celeste confirmed the property owner can test, but if the water indicated any contaminants, it would be difficult to know the source of contaminants based on the neighboring systems.
 - President McMillan also noted if the board were to require the testing, the results would be public record and would then create additional inequities for the neighboring wells who are legacy systems and not subject to upgrading to an advanced treatment system.

President McMillan moved to approve the variance request for 603 Klondyke Avenue, Eldora, Colorado. Board Member Johnson seconded. With all board members present, Vice President Fagan declared the motion carried.

ITEM 6. Public Health Improvement Plan Discussion.

Kelli Hintch introduced Elise Waln and Rachel Mintle to present the finalized Public Health Improvement Plan (PHIP) discussion prior to the Board of Health's approval during the November

meeting. The PHIP's focus on mental and behavioral health is based on previous assessments, community engagement efforts, and alignment with other county initiatives and plans addressing mental and behavioral health.

Rachel reviewed the process the Community Health Assessment (CHA) and the PHIP have undergone so far, including data review, prioritization of focus populations, a synthesis of community engagement data from the focus populations, a capacity assessment, initial strategy development and community input, and ultimately the creation and development of the PHIP. The CHA's data enabled the CHA/PHIP workgroup (comprised of BCPH staff) to identify priority populations to center when implementing work outlined in the PHIP, it also helped to identify areas of work and/or populations where BCPH can provide support and collaborate with partners, and supported the adoption of primary prevention, early intervention, and harm reduction efforts in the PHIP.

The PHIP goals are Community Understanding, Policy, Social Connectedness, and Sustainability and Funding. Each goal has objectives within it that BCPH will aim to complete within the first year of implementation, and additional objectives will be created for the subsequent years of the plan. The objectives of each of the goals builds on the work BCPH staff are completing.

Upon approval of the CHA and PHIP at the November board meeting, there will be a community launch of the plans in early 2024, the Health Planning and Evaluation team will work with staff to implement the plans in alignment with the 2024-2029 Strategic Plan, and will continue to adapt as necessary to respond to community need and align with partners.

- Vice President Fagan emphasized her willingness to link these efforts to work at Clinica since there is a large amount of overlap.
- Board Member Johnson asked if any of the mental and behavioral health work is a continuation from the 2018-2019 plan.
 - Elise confirmed and clarified the focus of the previous PHIP was mental health, and over the course of 2020-2022 the addition of behavioral health highlighted the need in the community to continue and refocus this work. Additionally, during 2020-2022 the county collected data from the community on needs and priorities, and mental and behavioral health was the most requested support.
 - Kelli provided there was also a move of focusing on mental health for staff based on increased workload and shifting of work during the pandemic. Additionally, the initial focus on mental health was more siloed, whereas the current plan highlights and emphasizes partnerships and collaboration across the county to accomplish the goals.

- Indira Gujral highlighted the community’s understanding of mental and behavioral needs has also shifted due to the opioid epidemic and an increased need in training for harm reduction efforts like Naloxone.
- Board Member Johnson asked for examples of flexible funding needed for this work.
 - Indira provided if funding sources explicitly listed a drug for harm reduction programs to decrease community-use, it limits the range of work the Harm Reduction team can do since the drug-use landscape is constantly changing. The funding source and language must be “flexible” and broad to meet the shifting needs of the community.
- Board Member Johnson asked for examples of the mental and behavioral health policy work staff have worked on.
 - Kelli noted staff have advocated for LGBTQIA+ rights in previous years, which feeds into the down-stream of mental behavioral health services.
 - David LaRocca also provided in the last legislative session, staff testified in support of mental and behavioral health screenings in schools, allowing licensed psychologists to prescribe mental health medications and expand access to mental health services, and testified in support of the removal of diagnosis requirements for children on Medicaid to receive mental and behavioral health services. David also noted the focus of the next legislative session will be to continue to advocate for access to mental and behavioral health services for the community.
- Board Member Johnson asked if the team is planning to collect feedback from the community as the plan is implemented in the next few years, and if there is a process to not overburden the community by requesting this feedback.
 - Elise noted the Boulder County Mental and Behavioral Health Roadmap has an element of feedback request built in, so the team will want to explore the partnership with Community Services to receive feedback through this process and to not over-ask the community for information.
 - Rachel also provided the team is working to create the Monitoring, Evaluation, and Learning plan which will outline and track these feedback mechanisms.
- President McMillan thanked the Health Planning and Evaluation team for their work in the creation, implementation, and alignment of these various plans. She also asked for more information and future discussions regarding the accountability of PHIPs since it is a state-mandated requirement.

ITEM 7. Director’s Report.

Lexi highlighted a few important updates in this month’s Director’s Report, including the hiring of the Healthy Homes Specialist, implementing the ARPA Mental and Behavioral Health funding plan in conjunction with the Opioid Abatement funding, the Health Eating and Active Living Fruit

and Veg program won an award for the Longmont Farmer’s Market, and the West Nile season has officially ended.

- President McMillan asked for more information and future discussion regarding childcare facility inspection fees.
 - Lexi noted the agency is working hard to keep the costs down and will conduct future analysis on the fees, but recognizes this is not a large revenue generator since these programs work on thin financial margins and serve vulnerable communities.
- Vice President Fagan emphasized her support and willingness to help promote Family Connects at Avista and other community hospitals.

ITEM 8. Old and New Business.

Jorden Thomas reminded board members and staff the November meeting has been rescheduled for Thursday, November 16th.

ITEM 9. Adjournment.

There being nothing further to discuss, Vice President Fagan declared the meeting adjourned at 7:05 p.m.



Landrey Fagan,
Vice President



Alexandra (Lexi) Nolen,
Executive Director