

## **Macon County Board of Health Meeting**

**Macon County Health Department WIC Conference Room  
1221 E Condit Street, Decatur IL 62521  
September 20, 2022, at 5:30pm**

Mark Scranton, Board of Health President, said, good evening, everybody. I apologize for the delays in getting started. It's 6:03pm on Tuesday, September 20, 2022, call the meeting of the Macon County Health Department Board to order.

Mark Scranton said, okay, Susan, go ahead and do roll call if you would. Roll call taken.

### **Roll Call**

Mark Scranton, President - present  
Jeff Entler, Vice President - present  
Candace Clevenger, Treasurer - present  
Carolyn Wagner, Secretary - present  
Jan Hack - present  
Debbie Hill - present  
Dr. Bret Jerger - present  
Dr. Venkat Minnaganti - present  
Cody Parks - present  
Dr. Jeff Smith - present  
Dr. Jerry Snyder - absent

### **Health Department Staff in Attendance**

Brandi Binkley, MPA, SHRM-CP, CPHA, Public Health Administrator  
Bethany Stapel, MPH, CPHA, Assistant Public Health Administrator  
Sheree Zalanka, Chief Financial Officer  
Susan Hertel, Administrative Assistant  
Evan Trimby, IT Support Specialist  
Luke Leach, IT Support Specialist Assistant  
Rachel Deerwester, Director of Clinical Nursing Services  
Marisa Hosier, Director of Health Promotion and Public Relations  
Lindsey Munsterman, Asst. Director WIC/FCM  
Teresa Smith, Director of Starting Point  
Kathy Wade, Director of Environmental Health and Emergency Preparedness

### **Public in Attendance**

Mike Baggett, Assistant State's Attorney

WAND News Team

Mark Scranton asked if everyone would please rise and recite the Pledge of Allegiance. Pledge of Allegiance followed.

### **Approval of Agenda Topics**

Mark Scranton stated okay, do we have a motion to approve the agenda topics as presented. Jeff Entler made the motion seconded by Dr. Bret Jerger, roll call taken, all votes yes, motion carried.

### **Public Comment**

Mark Scranton replied, is there any public comment, Brandi?

Brandi Binkley responded, "None that I can see present, and then what was in your packet, it was received via email."

### **Approval of Previous Meeting Minutes**

Mark Scranton responded okay, alright motion to approve Board of Health Minutes Special Finance Committee from August 16, 2022, and then the Health Meeting minutes from the 16<sup>th</sup>. We will vote separately. So, on the Finance Committee minutes anybody got any changes, corrections or additions? Mark Scranton made the motion to approve as presented, seconded by Cody Parks, roll call taken, all votes yes, motion carried.

Mark Scranton responded we need a motion to approval for Previous Minutes of Board of Health Meeting on August 16, 2022. Cody Parks made the motion, seconded by Dr. Bret Jerger, roll call taken, all votes yes, motion carried.

Mark Scranton responded yes, okay, we are going to be jumping around on the agenda a little bit for the sake of trying to accommodate some of our people that are here. So, I guess the first thing we will jump to is Discussion and Action on Masking Policy.

### **Old Business**

#### **Discussion and Action on Masking Policy**

Mark Scranton responded, this has been brought up the last two meetings and it was pointed out last month, we needed to make sure that this is on the agenda for discussion action this month. So, we will let everyone have the floor and speak to this. What everybody's positions are as of right now?

Dr. Bret Jerger responded unless someone has something different, we had a good talk about that last time.

Mark Scranton responded we did. I think the only thing in question was. I think, I think Rachel's back there, isn't she?

Rachel Deerwester responded yeah, I was able to ask on the CDC call this week and they are in the last stage of the legal process. They have not released the new information. They have said it would come out at the end of this week or beginning of next week on that call.

Mark Scranton responded and that is in regard to what we talked about with staff.

Rachel Deerwester responded that it is in regard to Healthcare Facilities and COVID rules.

Mark Scranton responded okay.

Carolyn Wagner responded in clinical settings, correct?

Rachel Deerwester responded in Healthcare Facilities in general. That is the rules that they are updating.

Mark Scranton responded well; I was looking at the personnel manual because it was one of the things on the agenda for tonight's discussion. And in the job classifications at the very back of the manual, you guys got a copy of that, it lists the different positions or staff that works here at the Health Department, and although this does not specifically include COVID, it does include a lot of other, other um potential hazards. And you'll note there, looking through that you'll see there's quite a few positions that are classified as not at-risk categories and then there's level ones and level two. Having talked to some other health care professionals and stuff, I'm in the belief that we're at a point in time where I think people should have the ability to make the decision based on what their comfort level is and as it relates to their specific jobs. I think it's important that people feel comfortable to make them the choice that best suits their needs specifically. But at the same time, I think there's some people that would probably appreciate the fact of having the option to do what they want to do. So, tonight for this conversation I would not only like to have some action taken on behalf of the Board making its own decision, I think trying to lead by example is important and part of that I think we should include those that have worked through all this and are probably at a point where they're ready to move on. Also, I think there's some categories here within the facility that, that warrant continue of masking in certain situations, and I think that's open to probably interpretation by Administration. But I think this job classification exposure guideline is definitely helpful because you see a large majority of our staff that's here, is not in settings that they're basically not at risk. But if somebody felt the need to do that in their own workplace environment and felt comfortable doing that, then I would by all means encourage them to continue to act as they see fit.

Debbie Hill responded I would just like to ask a few people if they have them like at Memorial Hospital, do you still wear masks there?

Dr. Minnaganti responded yes, they do.

Debbie Hill responded okay; do you wear masks at your office Dr. Smith?

Dr. Bret Jerger responded when treating the patients, front staff does not wear masks.

Debbie Hill responded at the Macon County Board Meeting?

Jeff Entler responded we do not.

Debbie Hill responded at the Courthouse?

Mike Baggett responded no.

Debbie Hill responded I am in a restaurant, and we don't wear them, and I have not seen one person have a mask on in months.

Candi Clevenger responded we do still wear them.

Debbie Hill responded pardon.

Candi Clevenger responded we do still wear them at Heritage. We still wear the masks at Heritage.

Debbie Hill responded Heritage, okay.

Dr. Smith responded I don't wear them in my office, and I don't require patients to wear them in my office.

Debbie Hill responded I just kind of wanted to get a feel who did, who didn't?

Dr. Minnaganti responded I think it also depends on the your risk of exposure to patients with COVID. We meet with the patients all the time, I don't know if it's COVID or not. So, if I'm exposed to someone that I do not know about then I'm probably risk to you guys. That's where our philosophy comes and now we expose someone who did not have an exposure like you could do. So that's what makes me wear the mask. Not for my own sake, but not to spread. If I were to have some contact with a patient in the hospital.

Mark Scranton responded I completely respect that, understand that and that's why I think it's important that people have that ability to make that decision.

Carolyn Wagner responded, I think we're continuing to screen as we come in here. We're all taking our temperature. We're all not coming if we have physical symptoms, we're in a nonpatient care setting in a Board Room, and we're spaced out. And I think for my own personal opinion is that in a setting like this, it should be optional.

Debbie Hill responded I second that I agree with that.

Mark Scranton responded okay, so I would present this as two separate issues. Then we have a motion on the table to change the masking policy requirements to Board meetings and make masks optional for meetings. Is that your motion?

Carolyn Wagner responded that would be my motion.

Mark Scranton responded okay, is there a second?

Jeff Entler said I seconded it.

Mike Baggett responded Debbie Hill had seconded it already.

Mark Scranton responded okay, roll call taken, 2 no votes (Jan Hack and Dr. Minnaganti); all remaining 8 votes were yes. Motion carried. Mark Scranton asked for clarification on how many yes and no votes. That was clarified for him.

Mark Scranton responded so now, the other issue in the conversation is how do we treat staff. So, I would like to hear opinions from the ladies around the corner back there if they don't mind stepping out where we can see them because you guys are the ones that are in the trenches working with your people every day. What are your guy's feelings amongst your personnel? What would you guys like to see continued?

Rachel Deerwester responded, sir I would like my staff to stay masked. We are vaccinating for COVID, so we are seeing people who are not up to date every day. And we did a big clinic in this room this morning, and we go into homes as well. So, I think it's important that we are protected.

Mark Scranton responded, and I would wholeheartedly agree with you that Rachel, because you guys are in what I would consider my interpretation of reading the job classifications. You guys are in level two, is that correct? Would you consider yourself being a level two?

Rachel Deerwester responded I am not sure what you're referring to. I don't have that paper in front of me. Mark Scranton said I'd be glad to share that for you. Rachel continued, Brandi has the paper and can probably answer that for you since she's got it there.

Brandi Binkley responded level two is you, Rachel, so it will be most of your staff. And I think something, so just so everybody knows, that particular document is referencing the risk of exposure to staff of some of the health issues that are listed in the personnel manual. But when we have made the decisions about staff and when they should be required to wear mask, we're also taking into account the risk that we present to the people that we go see. So obviously, the safety of our staff is utmost important. But this exposure classification does not necessarily represent, like, when we go into seniors homes and do case management for them. We also want to keep them safe. So that's something we've always taken into a lot of consideration. It's not just our staff person being safe from the person that they're going to see in their house, but also that we are keeping that person safe just in case our employee is sick and doesn't know it.

Mark Scranton responded and I appreciate that, Brandi. I guess what I was trying to get to was is it the desire or the will of the staff that you guys have a mask option for what I would call the non risk categories, or do you want to continue that everybody participates uniformly across the board because I think you guys deserve to have a voice and what you would like to see going forward.

Marisa Hosier responded I can speak only for myself because I didn't know this was going to be brought up or asked or whatever, but what I can say is. I follow people who have more expertise than me. I have no clue about chronic diseases and things like that and infectious diseases, so I just follow what people that I trust and that who do have expertise in that. So, I can't really speak, I just follow.

Mark Scranton responded but Marisa in your work environment right now, as it is presently. Are you interacting with people? So, I guess where would you fall in this classification?

Marisa Hosier responded it depends on the day. So, sometimes when I'm out in the community, I'm obviously working with large groups of people, and I would probably likely continue to mask for that reason, because I don't know their vaccination status. I know mine, but, like, in my office and things like that, or if I feel like it's a low exposure, in my office, it's just me so obviously I am not masking. But it also depends on the comfortability of people that I'm in the room with.

Mark Scranton said, Brandi, while Dr. Bret Jerger asked but you'd like to have that flexibility to make that choice?

Marisa Hosier responded um, I honestly, I could go either way. I just try to respect guidelines, and I'm a rule follower, so for me, like I said, I rely on people who are smarter than me.

Mark Scranton said, Brandi, do you have enough staff? I guess so we don't have to linger on this conversation. Do you have enough staff that are working in their offices that aren't really having any direct interaction with people that you feel that this would be warranted to give them the option not to? Or you think it's going to cause more conflict because people are looking at saying they're working over there, doing that, they don't have to wear a mask. I got a job over here. I have to keep wearing mine. I don't want to make this complicated or controversial in terms of how people feel about their job role dictates that they have to do this.

Brandi Binkley responded right now, if someone is alone in their office now, they don't have to wear it.

Mark Scranton responded okay. I didn't know what you guys' policy was now.

Brandi Binkley responded but to answer your question more broadly, I do think it would present some issues amongst staff, which is something else we've taken into consideration. Another thing that could cause a little trouble is that right now, the guidance is if you have had COVID, there's a certain time you can come back to work, but you have to be masked. And so, then it would be very obvious if they had COVID and are wearing a mask versus everybody else not wearing one. We have talked in great length with the supervisors and administration about when can we lessen the requirements for masks so that everyone doesn't have to wear them all the time anymore. But there are just so many caveats with the work that our staff do that make it difficult. And there's a lot of intricacies that we say if you're going into a senior's home, you do have to put it on, or when you're going to their home, ask them, do they prefer that you wear a mask? Would that make them most comfortable? Or if an inspector is going into a restaurant, if that particular restaurant is masking, that our inspector respects their comfort level of wearing a mask. So, there's just so many intricacies. Case management, going into people's homes, small offices where you have clients coming in and they can't social distance from you. So, I do think that we're getting to a time that we need to move forward. But also, just because there are so many intricacies. And then my concern about some of the issues that could come from that. And then also that whole wearing a mask if you've had COVID and coming back to work. That concerns me too. Because then basically people's health status is kind of broadcast on their face. So

that was why I really heavily leaned into getting some support from legal as far as where do you think we should go with this. That way, I at least felt like if anybody made any complaints, accusations, if they were upset about wearing one if they were sick then we at least have that kind of backing there before we move forward. Because we definitely adhere to being as safe as possible. As strict as possible with it.

Mark Scranton responded okay, so I think we'll table any the action in regards to the policy with staff right now, then.

Dr. Jeff Smith responded Mark; I just would like to make a comment. If you look around the room, there's never been a standard for masks. This is one of the things that's always bothered me about masks. I mean, I've traveled, been on planes where people are masked. Some of them look like their lingerie that was cut out and had some rubber band crocheted onto it. And it's very fenestrated or old. Just looking around the room today, I mean, Dr. Minnaganti has got two on, some are cloth, some are paper. I don't know the standard of that paper. Brandi did add, we do have a policy. Dr. Smith continued I don't know the standard of yours and the black ones, whether they're cloth or this or that. And so, for me, just as a physician, I thought every mask is the same. If the policy were an N 95 and everybody wore an N 95 that has a standard, I really understand that, and I get that. And when I was exposed in the hospital with somebody who has COVID, I wear an N 95. And even that's not as protective as maybe a hooded mask that we wear in surgery. So, I think that the mask kind of gives people a false sense of protection, a false sense of security, because if you're truly going into homes and being around people that have COVID, I would wear more than just the masks that are being worn in this room. I would wear an N 95. And that's what I would recommend for the healthcare workers in this community. If you're around people who are exposed. Now, Dr. Minnaganti may have a different feeling about that, but I think that we don't even know the standard of protection, of, say, your mask versus your mask. Maybe you have a 10% protection, maybe yours is 3%. Maybe the cloth ones they say are worse than nothing at all. And so, I think that needs to be taken into consideration in all of this as well.

Brandi Binkley responded I appreciate that. And I will say we do have a policy for staff. They have to wear a certain type of mask. We don't go into people's homes or serve people who do have confirmed COVID-19. And then when we have gone into facilities, primarily long-term care facilities when we were assisting with the response early in COVID, we did require staff to get tested, and wear N 95s, so we definitely have been mindful of that because I understand where you're coming from.

Mark Scranton responded Brandi do you guys have an inventory of N95 masks?

Brandi Binkley responded we do, but where only the staff that have been fit tested are using the N95s. So, any employees that it would be appropriate for have been offered to go do fit testing. And that cost was covered by the Health Department, and then they were provided the PPE that they needed. So, all of that has been taken care of. Any of the mask's staff are required to wear, those have been provided by the Health Department.

Mark Scranton responded so, you got people that wear masks, but they don't want to get fit tested? Did I understand you correctly?

Brandi Binkley responded I am sorry; can you repeat the question?

Mark Scranton responded so you're saying you've got people that will wear a mask, but they won't go get fit tested to wear an N95?

Brandi Binkley responded well, I mean, that's like all of our staff, all of our staff didn't really ever need to go get fit tested for the N95.

Dr. Minnaganti responded Mark - getting fit tested for a N 95 mask is a big chore. So, they have been trying to do that in the hospital, in a hospital setting for a while, and they have not been able to get all the personnel to do it. Every time they talk about it, it takes a while. Now, having said that, containment of infections is not an absolute thing. You cannot, whatever you do, except for the foods that we put in.

Mark said yeah positive verif; purified respirator.

Dr. Minnaganti continued by stating that if you, do it the right way, but everything else is fall short of it. So, if someone gets an N 95 and that's not properly fit tested, yeah, they're likely to get infections. And if someone does not really use a mask the right way, they might get infections. So again, with different types of masks, having different filterable, whatever the question is, the risk is always there. Even the mask that I'm putting on, the risk is always there. But try to contain as much as possible, right?

Mark Scranton responded right, because you can wear a positive air supply respirator, and if you got facial hair on a given day that's I'm not going to make it through a fit test, I mean, I've done it, so I know exactly what you're saying. Okay, so we will table that for future meetings and get some updates, hopefully from staff moving forward.

### **Discussion and Approval of the FY 2023 Proposed Budget**

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### **Discussion and Approval of the FY 2023 Pay Grade Scale Communication**

Mark Scranton responded okay, I got some other things to jump to here, but I guess we could go where we got discussion. Approval of the budget and the pay scale is under old business, not much to update on that other than we discussed it last month. It was approved, it was taken to the Finance Committee. I understand they approved it and now we're waiting for it to go to County Board next month, is that correct?

Brandi Binkley responded that is correct. And I did just want to make all of you aware that we have reviewed the meeting minutes from the Finance Committee budget hearings and there have been some offers and discussion of moving up percentages. And so, I did talk to them about the pay compression and things that we're experiencing now with the tiered system that we implemented and just told them that we were speaking with the Board and that we'll keep the Finance Committee updated about trying to figure out how we can address that as we move into future years as well.



### **Update on Popeye's**

Mark Scranton responded okay, update on Popeye's. New? Got anything new with that?

Brandi Binkley responded the only thing with that is no update, but they are going to come in November for the Board request to give their update there.

### **New Business**

#### **Review, Discussion and Action (if needed) on flex time/pay policy**

Mark Scranton responded okay, we have Flex times pay policy on the agenda, but we did not have everything that we have to have a proper conversation about that tonight. So, we're going to table that until next month's meeting. There are some questions that were brought up and some additional information that we needed to have.

#### **Presentation, Discussion and Action on Current Levy and Options for Use of the Health Department Health Fund Reserve by Macon County Treasurer John Jackson**

Mark Scranton responded I will speak on behalf of Mr. Jackson, who was supposed to be here to present tonight, just to kind of convey what his presentation was going to involve. Jeff and I had a conversation with the treasurer the other day in regards to trying to have him come to the Board and kind of discuss how the levy process works to kind of educate everybody what has to be done, because levies have to be revisited every year and there's a deadline that has to be done. We don't have that need right now to pursue that in any fashion. But I thought for an informational purpose, it'd be good to have him have that conversation with the Board. But part of that was we were discussing some options for what we can do with the reserves that we have in the Health Fund. There's a lot of opportunity to make our money work for us. And I think it's important as representing the taxpayers in Macon County that we not only set policies that make sense, but we also take appropriate actions for being responsible for how the taxpayer's money is utilized. And one of those things that I think has been lacking here is with the reserve that we have in the Health Fund currently. After we discussed this at great length over the last couple of months, going over the budget and everything else, it's become apparent that we maybe need to explore some options in regards to how that money is being invested. It's currently not being invested in such a way that we can get a return on it. So um, the treasurer had presented some options to us for purposes of the conversation and just kind of give you kind of an overview of the conversation was we could put the money into some funds that are rated that are cleared through the county, that are rated to where the money would stay safe without any risk at all. There's actually a lot of money the County could be invested overall right now. But we could be getting pretty good return on our money, and we start looking at the budget is what kind of got me thinking about this. There are things we could be doing if this money was invested properly that could bring back somewhere in the neighborhood, what? Mark continued, correct me if I'm wrong. We were talking about different depending on what we decide to do. We're talking anywhere from \$200,000 to \$300,000 potentially that could be brought back to the Health Department specifically by merely just putting this money to work for us.

Mark Scranton continued there's some options with some funds that they have. There's also an opportunity with some treasury notes that are paying out about three, three and a half percent right now, which is still way above getting locked into a CD type of investment for a specific period of time. The nice thing about these funds that he alluded to was within 24 hours we could get our money out if we got ourselves in a situation where we needed so this gives us a great deal of liquidity with this. But if we can get 3 to 5% on our money with what we have right now, that's pretty significant, guys. And we're not doing anything about it. And I would like to see us be able to move forward with the conversation of what vehicle we might use to facilitate that, but also how much we would like to commit to it. One of the recommendations was regarding the treasury notes, we would take. I'll make a number. We'd take like \$500,000 or a million dollars or whatever and you drop that into some notes. You do that and then 30 days later you repeat the process again. So, you're putting your money in over time. So, by the time you make your fourth deposit, your first one's getting ready to kick back out, and then we have that money that we could turn and reinvest it for the interest we would accumulate off of that investment. We could roll it right back over. And it's a staggering amount. When you take the numbers of what we got right now and calculate that out 3 to 5%. It's a significant amount of money. It would help to fund pay increases, potentially. It could help to fund other capital expenditures in the form of equipment. Our security stuff we talked about trying to get that done. That's \$100,000 that we're staring at, potentially to get that worked out. And the fact that we have it, we got to do something with it. And I think the best thing to do is force is to put this money to work for us. We can't walk it back. We can't write a check for the taxpayers and say, here you go, here's your money back. I looked at my property tax, for example, myself. It was \$300 a year. And that might give people momentarily a little bit of excitement, say, oh, I got a check from the County. That's great. But a month from now, you'll never remember that it happened. So, I think the best thing for us to do as a board is to do our due diligence and research what the recommendations are by the treasurer, and he's having this conversation with other departments throughout the County because there is a lot there that could be invested. That could return a lot of money to the County. And I think that's a really important thing to do. You don't take all your money that you make, personally, I don't put all my money in a checking account. I've got it in various instruments that I feel comfortable with because I want my money to work for me. It's the only way you can get ahead. And I think, looking down the road, if something happens and we have a need for some additional funding, maybe we lose some grants, and we want to keep some people working because some of the tasks that are getting done under a grant are no longer funded, but we want to keep that person on board. Those types of things could be very easily justified if we can reinvest this money and put it to good use. So that was what the treasurer was going to talk about tonight. And Jeff, do you got anything to add to that?

Jeff Entler responded maybe one thing; I think you're probably all wondering what the risks are. There are virtually no risks. They are very a...

Mark Scranton responded the notes are totally risk free.

Jeff Entler responded yeah, there's no volatility. We can get our funds out in 24 hours. So, you ask, well, why aren't we doing it? And Mark and I kind of asked the same question, why aren't we? Mr. Jackson is a strong advocate of this, and I think you'll hear more about it in other departments in the future.

Mark Scranton responded anybody got questions on that?

Brandi Binkley responded I have a question.

Mark Scranton responded yeah.

Brandi Binkley responded so I know when you were talking about using that Health Fund effectively, you mentioned salaries and paying staff a couple of times. So, I did want to kind of give an update on the vacancy report that we provided last month as far as how many of our positions are vacant. And we do have 19% of our positions vacant right now. We continue to receive comments from current staff and then most of our exit interviews that we went over last month, as you recall, most people are leaving because they can go get paid more somewhere else. That goes for current staff. And then the difficulty with getting people to agree to interview to come here in the first place, and we've lost people that have a lot of seniority. I know we discussed raised percentages and ensuring that those were fair and were adequate, especially with the inflation levels and where they are. And so, I know we talked about it in Finance Committee, but not the full board. I would respectfully request that we do look at incoming salaries again, and most definitely current staff salaries, because the people that are covering the 19% of vacancies and probably more vacancies to come are our current staff and specifically our supervisory staff. I do feel very, very strongly that needs looked at in general, and I know we've talked about it, and then I know we have some positions right now. We've talked a lot about nurses and level eight positions and general care coordinators, case managers. Now we're seeing this with licensed practical nurses as well, and also dental assistants. And so, the problem is not just in one area. The problem is not just at one level. We're hearing this over and over. We have employees concerned about paying bills. So, with having over \$7 million in the Health Fund, I agree we need to invest in it, invest it, make it work. And I'm excited to hear more from John Jackson, but I would respectfully request, with everything that I know and see here, that we do something now and that we don't wait until next year to ensure that our staff are adequately paid because we cannot afford to lose more staff.

Mark Scranton responded I appreciate those comments but we're getting off topic here in regards to that.

Brandi Binkley responded oh I was just talking about the Health Fund Investment.

### **Closed Session**

Mark Scranton responded okay, I've got another thing that we wanted to cover, and I know Mike is kind of on a time scale. Do we want to move to jump down to that right now?

Mike Baggett responded yes, if that is the pleasure of the Board.

Mark Scranton responded okay. So, in the interest of time to make it work for everybody, I'm going to make a motion to go into closed session.

Mike Baggett responded for the record, this will be pursuing section 2.C.1 of the Open Meetings Act to discuss the appointment, employment, compensation, discipline, performance, or dismissal of specific employees of the public body.

Mark Scranton said so I will make a motion we will go into closed session.

Brandi Binkley responded hold on, do you want them to stay for Department Division Reports? I don't know what were or how long...

Mark Scranton responded I don't think there's anything that would require them to stay to go over anything on the reports. Brandi said okay. Mark continued we don't have a lot of questions in regards to that so I'd like to give them the latitude to excuse themselves, that's fine.

Brandi Binkley responded you can all go home.

Motion made by Carolyn to go into Closed; Seconded by Jeff Entler. Mark Scranton responded roll call, Susan. Roll call was taken.

Went into Closed Session at 6:38 PM.

Came back into Open Session at 7:39 PM.

### **Review of Personnel Manual**

Mark Scranton okay, we will pick up where we left off. And in the interest of time and priorities, we will forgo some other things that are on the agenda. Brandi, do we have a need to dive into the personnel manual tonight or is that something we could review for next month? Now that we've all got a copy of it? Is there something prudent that we need to do?

Brandi Binkley responded no. So, the usual process is we review it every year at the September Board Meeting and if there's any policy changes suggested throughout the year, that can happen anytime, but we just have regular practice of doing it at least once a year.

Mark Scranton responded okay.

Brandi Binkley responded if there are any suggested changes, we do always send those through legal before we would bring them to the Board for any kind of review and approval.

Mark Scranton responded I would ask the board to take time between now and next month, review the manual at your leisure. If you find anything that you have questions on, direct them to Brandi. And if there's anything we need to make changes on, then let's do that at next month's meeting. We can have discussion and action on anything I think we need to make changes on to move it to legal for approval.

### **Review, Discussion and Action (if needed) on flex time/pay policy**

Jeff Entler responded Brandi, is there a considerable amount of data about flex time in here?

Brandi Binkley responded you mean as far as how the policy works?

Jeff Entler said yes.

Brandi Binkley responded yes.

Jeff Entler responded that's something I've got a high degree of interest in, and I just ask everybody to look at that closely. Maybe kick around the thought of moving back to just a direct overtime pay. It's something we could talk about in a lot of depth.

Mark Scranton responded yeah, we had the flex time thing on the agenda tonight, so I think we'll take that. Jeff Entler stated yeah it kind of dovetails. Mark Scranton yeah we'll move that to next month.

Jeff Entler continued by stating that it might be a good time to pull that out next month.

### **Board Education: Communicable Disease Updates**

Mark Scranton responded Communication, Board Education.

Brandi Binkley responded the only two things just communicable disease update. We did send this to you via email, but we only have the two confirmed cases of monkey pox, or you may see it called MPX or MPV. We have vaccine and we'll be starting to vaccinate tomorrow. We have done some previous vaccinations as well and then COVID we are at low community level and still in high community transmission for healthcare facilities. And then the Board of Health meeting dates for 2023 were in your packet. So, you do have all of those. If you see any problems or anything, certainly let us know. But we went ahead and kept the third Tuesday of the month and wanted you to have those dates as far in advance as possible. That's all I have. Thanks.

Mark Scranton responded okay. Board of Health meeting dates for 2023. That's just strictly information, right?

Carolyn Wagner responded that is in the packet she said.

Mark Scranton responded yeah, and then asked that is strictly information, right?

Brandi Binkley responded yeah, that's what I was just talking about. As far as it's in there, if you have any changes, let us know. But it is still the third Tuesday of the month.

### **Presentation and Acceptance of Financial Report**

Mark Scranton responded alright. Okay. Presentation and acceptance of financial report.

Sheree Zalanka responded the report is through the end of August, and it's 75% into the fiscal year. Fund balance is 7.4 million. Total revenue at 6.2 million, which is 88.9% of budgeted revenue. Total expenditures at a little over 5 million, which is 71.8% of budgeted expenditures.

Mark Scranton responded does anyone have questions on the financial report as presented? Mark Scranton made a motion to accept the financial report as presented, seconded by Carolyn Wagner, roll call taken, all votes yes, motion carried.

### **Review of Department Expenditures**

Mark Scranton responded review and approval of Department Expenditures. I did have one question that relates to this. I was told that there's discussion about possibly moving AP back to the County. Is that an accurate statement? Is that something you guys are thinking about doing or what's the status with that?

Brandi Binkley responded about moving something we are doing to the County?

Sheree Zalanka responded I have not heard a single thing about that.

Brandi Binkley responded neither have I.

Mark Scranton responded okay well, I want to clarify that for the record. I was told that you guys have been having a conversation about moving that back to the County, so they can process AP.

Sheree Zalanka responded no, there have not been any conversations involving us regarding that. Mark Scranton said, okay. Sheree continued they are reviewing a few of our invoices now. Every week they look at our check run and select about five invoices, and we send those down to the auditor's office, and they review those.

Mark Scranton responded so they're just kind of randomly pulling stuff?

Sheree Zalanka responded that has been the only change made to our current policy.

Mark Scranton responded okay.

Bethany Stapel responded are we allowed to ask where that information originated?

Mark Scranton responded that's just what I was told by somebody at the county building- that that was a conversation that was being had. I just wanted to clarify if that's the intentions or not. And if it is, then we need to discuss the reasons behind that process.

Bethany Stapel responded if conversations are being had, we're not being involved with those.

Mark Scranton responded okay. All right. That's why I want to get some clarification on that. Okay, any other questions in regard to expenditures?

Mark Scranton made the motion to approve seconded by Cody Parks. Roll call taken, all votes yes, motion carried.

### **Grant Applications for Review and Approval**

Mark Scranton responded Grant applications for review and approval?

Brandi Binkley responded none.

Mark Scranton responded okay.

### **Department and Division Reports**

Mark Scranton responded Department Division reports. Staff has left. I don't think anybody has any questions, but they could ask Brandi.

Carolyn Wagner responded I have one question with regards to the lead program, I noticed what Mr. Faber had sent, and I was just curious if we, I realize that WIC clients automatically get lead testing done with their hemoglobin. Is that when we're still doing that?

Brandi Binkley responded I don't remember off the top of my head.

Carolyn Wagner responded obviously is that still a requirement, is that still a requirement by the state that, that has to be done prior to getting into kindergarten?

Brandi Binkley responded I'm not sure. I can check and find out. I don't remember off the top of my head if it's required for them to have it.

Carolyn Wagner responded see, I always made them have it, but I don't know that they would have failed them if I hadn't done it. And it was rare that I would come across a kid that hadn't had it. But it makes me wonder how we're doing as a county, percentage wise, of getting our kids tested for lead by even, like, 24 months. I'm just curious. He brings up a good point, and we don't know if we're not following them, if they're not all coming through WIC which...

Brandi Binkley responded right, right, yeah; I can definitely find for you.

Carolyn Wagner responded okay thank you.

Mark Scranton responded Brandi, I didn't see nothing in Kathy's report as far as where we at with the new implementation of the new recording training and stuff. Is that forthcoming still?

Brandi Binkley responded yeah, they already started meeting. We signed the contract after the County process all the way through, and then they started. Same with the nursing electronic medical records. We've already started having the meetings to get things going so it's moving along.

Mark Scranton responded and I will ask once again for clarification of inspectors who's doing what, because that seems to be missing from the report. Once again, unless I've missed it somehow.

Brandi Binkley started to say, I can ask.. Mark Scranton continued, we have missed that for, like, three months, and I asked for it to be brought back as part of the package, and now it's not here once again.

Brandi Binkley responded I think she was just trying to make hers more consistent for what the other divisions were doing, where there's were just reporting what types of activities were conducted, not necessarily broken down by every single staff person. But, if you want that specifically for her report, I can definitely just tell her that..

Mark Scranton responded I want to see it, and I don't want to have to ask again for it because we brought this up before, because I think when we're talking about hiring, somebody else is being advertised right now. I want to see more balance there between the inspectors, and right now, it's pretty skewed, and I don't have those numbers here to look at, so it's kind of hard to evaluate where that's at.

Brandi Binkley responded I can tell her that you would like to require that, and then also, if you do want to have a conversation about the staffing of what they're each doing in the division. Mark said, okay, while Brandi continued on saying, I'm happy to have that conversation.



Mark Scranton responded it's just easy to have that to refer to.

Brandi Binkley responded yeah it is already filled.

Bethany Stapel responded we're not hiring for that.

Mark Scranton responded uh there's an ad on Facebook, on the Health Department's page looking for somebody.

Bethany Stapel responded we leave it until the person has actually started. So that might be where there was discretion. But, somebody has started. So, if that was an error then.

Mark Scranton responded so you've already filled a vacancy that was there?

Bethany Stapel responded yeah. I don't know for sure when that was posted, but, yeah, there is not a vacancy any longer.

Mark Scranton responded okay. I find it interesting we're filling vacancies when we've got, I don't know, and we got a lack of balancing out how things are getting done. I don't why there's a need to get somebody else in that department right now. And that's what concerns me, because I'm sitting here looking at it, and every month I have got the numbers to look at and now, I'm sitting here and they're not here again. And the last time we had this conversation about that specifically, there was a great imbalance, we had about two people that are doing about 80% of the inspections.

Brandi Binkley responded well, they do have different job duties and job assignments, which is why I said I'm happy to break it down with you and go through it in detail if you want to sometime. Because they have different responsibilities. One of them has additional duties specifically.

Mark Scranton responded oh, I'm not disputing that whatsoever. It's just when I look at the numbers of a couple of people and they're in triple digit numbers, some people are down to single or double digit numbers. That's a huge discrepancy when they're all being paid to do the job. You wonder why it's so out of balance.

Brandi Binkley responded right, I understand. I'm just saying they don't all have the same...

Bethany Stapel responded and I was going to say that new employee you won't see, you know, there'll be some training before you would see them (on the reports).

Mark Scranton responded no, I understand that. I'm not questioning that. Okay. So, does anybody else have any questions on the division reports?

### **Division Presentation – Starting Point**

Mark Scranton responded, and we have tabled the presentation for Starting Point tonight because I told Brandi it's probably going to tight on time and I probably wouldn't have the ability to do that tonight. What else? Anything else that I have missed?

### **Employee Recognition**

Mark Scranton responded I think employee recognition, which is the.. Carolyn said, it is the last page, and Mark Scranton responded it's the very, very last page. Oh, here we go. Thanks. Whitney Allison - eight years, Sarah Stoutenborough – seven years, Rebecca Stewart - five years, Ireta Lincoln - two years, and Dr. Kim, our dentist - one year.

Jeff Entler responded let's give them an applause.

Mark Scranton responded I believe we covered everything that we had on the agenda. Unless somebody sees something might have been overlooked. I know it was kind of convoluted bumping things around.

Jeff Entler responded I just have a question about your recruitment efforts. We still have 19 open positions, is that correct?

Brandi Binkley responded we have 17, and it's 19% of the positions are open. 91 total positions and 17 are open.

Jeff Entler responded what a, how do you recruit for those jobs? What methods?

Bethany Stapel responded and said (to Brandi) if I miss anything, let me know but those are posted here in the building, and then they're posted on our website, on the County's website, on Indeed, and the Community outreach events.

Brandi Binkley responded community outreach events, and sometimes we go to things that are a little bit more recruitment specific. We would definitely take them then like if we go speak to a class at Millikin or something, we would provide that information in that capacity. If we do a more general presentation, we'll mention that we do have job openings and how much of a variety they are and give examples. And so, we have that personal connection with the community to try to recruit. And then of course, we do have a lot of students coming to the building, not just nursing students but other interns. So, we always make sure to let them know to watch the website for open positions.

Jeff Entler responded so do you get a lot of people through Indeed? That's kind of a mainstay for younger people, right?

Bethany Stapel responded we get a lot of applications. I guess I don't want to generalize because I don't have statistics in front of me, and Jeff Entler responded but is it a lot of people?

Bethany Stapel responded but I would say most of them are not qualified for the position.

Debbie Hill responded or they don't want to work.

Jeff Entler replied well, I know that's an epidemic problem in the society, healthcare, and construction, industry but I heard your a little bit of a plea a couple of times. But that's a difficult job and if there's something that we could do or if there's some creative ideas that anybody can bring up to help you, if there's a way to fund something like a, like a recruiter if that would be of any help.

Mark Scranton responded that's one of the things. How far are you guys reaching out with the method you're using right now? Are you just doing like right, tight in central Illinois like a 50 miles radius?

Brandi Binkley responded no; it's not restricted to there.

Bethany Stapel responded it's not. I mean, I will say though respectfully that our wages it's just hard to compete. And I'm not saying that we're going to be at the same level as the hospitals or some of our counterparts that are similar, but people kind of dismiss it right away when they learn of the salary. If they are, happen to be interested. It is, of course, though they do have to report to the office. It's not a remote job, which also, so, like you said I'm totally open to any creative ideas. As we talk about and I'm not sure what the conversation regarding flex looks like but depending on, like I think we do need to look at creative ideas because if that is a benefit that we're going to, might not be there in the future. Then I think we do need to get a bump of salaries, or what does that look like of those creative ways to stay progressive in the job market right now? Because right now employers are doing lots of creative, progressive things and it's hard for us to compete against them.

Carolyn Wagner responded, what are your counterpart's Health Departments doing? Because comparing Health Departments to the hospital has always been an age-old problem and people have looked to the other benefits, not rotating shifts as a nurse, not working holidays, but what are your other Health Departments doing? What's Sangamon County, Logan County, Christian County? What are they doing for recruitment?

Jeff Entler replied and are they at the same, the same um level of need? Are they down 19%? 20%?

Bethany Stapel responded okay most Health Departments are as we talked about last month or the month before in finance. And I know that Mark himself looked into some of this too, that it's very

different across the board like all Health Departments. But I think that everyone's seeing the same challenges right now, whether it's the Health Department or something else. But our other health departments, I think they also are having the same challenges, little to no applicants, but they're also of varying degrees and sizes, so they might be missing one employee, so they're at that 19% just along with us. So, I think that there's definitely those challenges there, but it definitely it's hard to compare exactly, but we definitely have pulled that information and we're in constant communication with our regional partners across other local Health Departments, and we constantly try to pull that data from Sangamon and from all the other local Health Departments to see where we're at. It doesn't look exactly the same as far as because I think Sangamon there is one, correct me if I'm wrong, if you remember off the top of your head, but there pay is higher. There is like a staggered shift in there, too. I will say, from my experience, I do think that that is common in the Public Health world of flex time and even across the other county departments. So, I think that's something that people are used to. If they're going from another Health Department to our Health Department, that would probably be something that they would expect.

Dr. Jeff Smith responded but for most of the positions, are they nursing positions or what are the qualifications? What are you looking for?

Bethany Stapel responded yes, so most of our hardest positions to fill are those, like the level eight, professional level and up. So, a four-year degree, correct me if I'm wrong, there's only one nursing position I think available, but it's been vacant for well over a year, probably more. I'm leaning on what I'm really confident in saying there that well over a year it's been vacant, but most of them are four-year degrees or higher. We don't really have a hard time. It's much easier for us to fill the levels one through seven, because in those levels, I feel like our benefits are pretty great because you're not working a weird shift overnight, you're having a set schedule. You do get health insurance, or you qualify for health insurance, sick time, vacation time where you wouldn't probably like at a fast food restaurant or something like that. So, I think that those positions do tend to be easier for us to fill versus the degree required positions, which are driven by our grant funders of what the requirements for those programs are. If that makes sense or answers your question.

Jeff Entler responded could I request a list of the open positions just to be able to review them? I think you have..

Bethany Stapel responded I think you should..

Jeff Entler responded are they in the packet?

Bethany said she could...

Jeff Entler asked maybe just a fresh one for?

Mark Scranton said, yeah, you never know who you cross paths with in conversation.

Jeff Entler went on to say, it'll give me a..

Bethany Stapel responded yeah, do you want our staff list with it, or you want just the vacant position right now?

Jeff Entler responded I'd say just whatever you think is whatever's easiest for you. I can sift through it.

Bethany Stapel responded they're posted on our website and I can just send you the link. We keep that pretty updated, like I said, and it's on the County website, too, and then you can click on those and see the actual it's listed like in a group format and..

Jeff Entler responded, and does it say that they're level eight?

Bethany Stapel responded and then if you click on the posting, then it goes to the actual posting and you can see what level and everything.

Jeff Entler responded I will do that.

Bethany Stapel responded I can help you.

Jeff Entler responded but why don't you send us just the shortlist of the 17 and then everybody can quickly get at a glance.

Bethany Stapel responded okay, because I want to make sure that I get to you what you're requesting. Do you want me to send that to everyone? And I will say in my report that I give you it has the positions that when I put the report together that day what the vacancies were. Jeff Entler responded, sure. Bethany Stapel continued but it doesn't necessarily say how many were hiring for each position. So, I can clarify that. Okay, because right now there might be six or seven. I forget how many positions or job descriptions, but then some of them there are multiple vacancies.

Mark Scranton responded so this might be really old school. It's just a thought. Sometimes that's what you got to do because this day of technology and stuff, everybody is like, you can't, you can't read a person on a piece of paper and I'm not aware that the Health Department has ever done this in the past. But what about going out to some community events, like going to the Chamber Breakfast and talk about what's going on at the Health Department and tying that job need in to spread that word out verbally to a group of people of the community? Because honestly, unless somebody was going to look at our Facebook page right now, I bet you 90% of people out there have no idea that we're looking for help. So, I mean, I'm just thinking about if nothing else you have got other things to talk about. Hey, what's new at the Health Department? You could talk about what we're doing with the food stuff. You could have a little story to tell at like, Chamber Breakfast, for example, something like

that, or Libertarians or some of the other civic groups around. I don't know if you guys have ever done that in the past, but to me you've got a captive audience. You got them for a short period of time talking about what's going on here.

Bethany Stapel responded we definitely have, and that's what Brandi said also when we were going through all the places that we advertise for jobs.

Brandi Binkley responded we have done tons of that for years. Doesn't mean that we can't get into new places, though. Bethany Stapel chimed in yeah. Brandi Binkley continued we're pretty short staffed on who can go kind of do those presentations; we have been pretty active with that and enjoy doing that.

Debbie Hill responded workforce, they're on the news every night, and they are there making brochures and stuff for people, the packets to go in and pick them up. And that would be something you could call Rocky and ask her because she works hard doing what she does.

Brandi Binkley responded we can check into that.

Mark Scranton responded yeah, just something to think about because nothing else we tell a story about what's going on with the Health Department. You got a lot of business professionals that go, and belong on the Chamber, go Chamber events and stuff.

Cody Parks responded do you go to like the job fair at the Holiday Inn when they have that twice a year?

Debbie Hill said, well they probably..

Mark Scranton responded whatever the attendance for those things are horrible. There are more people there doing the event than people that show up, which is crazy.

Cody Parks responded it is.

Mark Scranton responded it doesn't make any sense. I mean, I had a guy told me the other day, they, just a few years ago they had over 200 people show up and they would weed out about half of them. And now they had like 60 people show up. And by the time they got done, what they weeded them down to and the ones they brought back, they had like six people after they went through the whole process.

Debbie Hill responded the railroad comes in every day and they say they cannot even get two or three applications.

Mark Scranton responded it's a tough problem. It's not just, it's not just the pay, it's the mentality of ... dealing with post COVID.

Debbie Hill responded it a whole different world.

Mark Scranton responded I don't know how people are surviving. I really don't. There's other people out there. You know, I see it in her business when I go in there, you see all these guys that are working for different companies going in and out of there and stuff and people just cross paths. There are some guys out there, they're just absolutely busting their butts to just try to have a job to make ends meet. And they're not making a lot of money.

Brandi Binkley responded we have a lot of staff like that too. And that's part of why I keep bringing it up. I don't want to lose staff because we've got really good people. If we lose more people, we're in trouble. You know, because you're right, it's hard to find people. Debbie Hill added, it really is. Brandi Binkley continued, good, hard workers that are committed show up and everything. So, we are grateful for sure for the ones that we get and we're sad about the ones that we lost and want to get creative in whatever ways that we can.

Mark Scranton responded okay. Anything else for discussion?

Bethany Stapel responded I don't have anything. I just was pointing out unless that was intentional because you asked the review of the Board of Health By-Laws. Was that intentional to skip?

Mark Scranton responded oh, I'm sorry, I overlooked it. I thought we were going to just do that with the Personnel Manual for next month.

Bethany Stapel responded that's fine. I just didn't know.

Mark Scranton responded thanks for pointing that out. Anything else?

Cody Parks responded I don't think so.

### **Adjournment**

Mark Scranton responded motion to adjourn. Thanks everybody.

Respectfully Submitted,

Susan Hertel  
Administrative Assistant

President: \_\_\_\_\_

Secretary: \_\_\_\_\_

Date: \_\_\_\_\_