

MINUTES OF THE MEETING OF THE
INDIANA STATE DEPARTMENT OF HEALTH
EXECUTIVE BOARD
January 10, 2018

The meeting of the Executive Board of the Indiana State Department of Health (ISDH) was called to order at 10:00 am in the Robert O. Yoho Board Room of the ISDH building by Brenda Goff, Chairperson. The following Board members were present for all or part of the meeting:

Blake Dye
Naveed Chowhan, MD, FACP, MBA (via phone)
Brenda Goff, HFA (Chair)
John Gustaitis, MD (via phone)
Robin Marks, DVM
Joanne Martin, DrPH, RN, FAAN
Richard Martin, DDS
Suellyn Sorensen, PharmD, BCPS
Patricia Spence, PE
Tony Stewart, MBA, FACHE, HFA
Stephen Tharp, MD (Vice Chair)

Members not attending:

Kristina Box, MD, FACOG (Secretary)

The following staff members were present for all or part of the meeting:

Pam Pontones, MA, Deputy State Health Commissioner/State Epidemiologist
Trent Fox, Chief of Staff
Joan Duwve, MD, MPH, Chief Medical Officer
Judy Lovchik, Assistant Commissioner, Public Health Protection and Laboratory Services
Art Logsdon, Assistant Commissioner, Health and Human Services
Christine Moody, Executive Director, Center for Deaf and Hard of Hearing Education
Katie Hokanson, Director, Trauma and Injury Prevention
Eden Bezy, Director, Office of Public Health Performance Management
Krista Click, Director, Food Protection Program
Megan Griffie, Maternal and Child Health
Manda Clevenger, Office of Legal Affairs
Kelly MacKinnon, Office of Legal Affairs
Whitney Fritz, Office of Legal Affairs

Guests:

David Patterson, MD, Academy Allergy, Asthma & Sinus
Spencer Grover, Indiana Hospital Association
Andy VanZee, Indiana Hospital Association
Cliff Beyler, Indiana Hospital Association
Barb Leslie, IU Newborn Screening Lab

Call to Order

Brenda Goff, Chairperson stated that a quorum was present and called the meeting to order at 10:00 am. She then asked if Board members had any known conflicts of interest to declare. Hearing none she proceeded with the meeting.

Minutes

Ms. Goff asked for discussion and/or corrections to the minutes of the November 8, 2017 Executive Board meeting. Hearing none she entertained a motion for approval. On a motion made by Joanne Martin, seconded by Patricia Spence and passed unanimously by roll call vote, the Board approved the minutes as presented.

Official Business of the State Department of Health

Pam Pontones, MA, Deputy State Health Commissioner/State Epidemiologist reported that as of December 30, 2017, Indiana is experiencing widespread influenza activity, and disease burden continues to increase statewide. Influenza A (H3N2) is the predominant circulating strain, both in Indiana and nationwide. This particular strain is often associated with more severe infections and a higher rate of hospitalization. Several local health departments and hospital systems have implemented or are considering implementing visitor restrictions in health care settings to combat the spread of influenza among patients and staff. Individuals with uncomplicated cases of influenza are encouraged to seek medical attention from a health care provider or urgent care facility rather than visiting the hospital emergency department. As always, Hoosiers should practice the “Three Cs” to help prevent the spread of flu and other infectious diseases:

Clean: Properly wash your hands frequently with warm, soapy water

Cover: Cover your cough and sneeze into your arm or a disposable tissue

Contain: Stay home from school or work when you are sick to keep your germs from spreading

Trent Fox, Chief of Staff noted that Dr. Kristina Box was at the State House with Amy Kent, new Legislative Director presenting ISDH Updates to the Senate Health and Provider Services Committee. Trent reported that Governor Holcomb stated in his State of the State address that he wanted Indiana’s infant mortality rate to be the best in the Midwest by 2024. Art Logsdon, Assistant Commissioner for Health and Human Services is up for the challenge.

Public Health Protection and Laboratory Services Commission

Discussion of Repeal of On Farm Poultry Processor Exemption Rule 410 IAC 7-25

Judy Lovchik, PhD, Assistant Commissioner for Public Health Protection and Laboratory Services Commission presented Repeal of On Farm Poultry Processor Exemption Rule 410 IAC 7-25 for discussion. Dr. Lovchik introduced Krista Click, Director of the Food Protection Program to provide more details and answer questions. The ISDH has requested an exception to the current rulemaking moratorium so that it may repeal Rule 410 IAC 7-25, On Farm Poultry Processor Exemption. This rule is no longer necessary because the General Assembly amended the rule’s authorizing statute, IC 16-42-5-29 so that the standard for poultry products sold by home-based vendors, farmers markets, or roadside stands complies with IC 15-17-5-11. This newly referenced statute is enforced by the Indiana State Board of Animal Health (BOAH). Pursuant to this statutory change, BOAH amended Rule 345 IAC 10, which now conflicts with ISDH Rule 410 IAC 7-25.

Health and Human Services Commission

Emergency Adoption of Amendments to Rule 410 IAC 3-3 Newborn Screening (adding Severe Combined Immunodeficiency Syndrome (SCID) and Spinal Muscular Atrophy (SMA))

Art Logsdon, Assistant Commissioner for Health and Human Services Commission presented amendments to Rule 410 IAC 3-3 Newborn Screening to add Severe Combined Immunodeficiency Syndrome (SCID) and Spinal Muscular Atrophy (SMA) and raise the newborn screening fee for emergency adoption. The emergency rule will go into effect when it is filed with the *Indiana Register*. The proposed emergency rule amendments would add SMA and SCID to the disorders for which newborns are tested and raise the newborn screening fee by \$10 to cover the cost of the test. ISDH is seeking this emergency rule to require screening for SMA and SCID while it continues to make the addition of these conditions permanent through the regular rule-making process. Starting the screening earlier than when the rule is final will mean more babies are screened, allowing for earlier intervention if necessary. Treatment is now available for both SMA and SCID, but time is of the essence for those treatments to be most effective.

The laboratory that performs newborn screening is preparing to test for these disorders, but is not yet able to do so. This emergency rule would not be effective until it is filed with the *Indiana Register*. ISDH plans to wait until the laboratory is able to test for these disorders to make the rule effective, but does not want to wait until the next Executive Board meeting in case the laboratory can begin testing before then. This emergency rule would be effective for 90-days with the possibility of a 90-day extension.

Ms. Goff asked for comments from the Board, staff and public. Blake Dye stated this will be a challenge for hospitals. David Patterson, MD, Academy Allergy Asthma & Sinus spoke in favor of this emergency adoption. Jamie Sexton, Immune Deficiency Foundation sent a letter expressing their support for this emergency adoption. Hearing no other comments, Ms. Goff entertained a motion for approval. On a motion made by Dr. Tharp, seconded by Dr. Richard Martin and passed unanimously by roll call vote, the Board approved amendments to Rule 410 IAC 3-3 Newborn Screening to add Severe Combined Immunodeficiency Syndrome (SCID) and Spinal Muscular Atrophy (SMA) and raise the newborn screening fee for emergency adoption.

Other

Center for Deaf and Hard of Hearing Education (CDHHE) Update

Christine Moody, Executive Director, CDHHE, provided an overview of the Center. It was opened in July, 2013 as established by IC 20-25-11. The Center's Vision is for deaf and hard of hearing children to have the resources and support to reach their full potential. The Center's Mission is to promote positive outcomes for all (ages birth through school exit, throughout the entire state, equally with expertise and information for all communication opportunities) deaf and hard of hearing children through information, services and education. Ms. Moody is also a parent of a hearing impaired child.

The Center's guiding principles are key to making this system of education work perfectly:

- Consensus exists around the critical need for early language development for all deaf and hard of hearing children to ensure optimal outcomes. The historical issues are old news – we are moving beyond the methodology debate.
- The Center respects parent choice in all things
- The Center provides all resources, information and support in an unbiased manner.

The Center serves families and children from birth to 21 years of age and the professionals who work with them through a central office and two of four planned regional centers.

There are 20 staff members and numerous contractors who provide unique expertise from diagnosis through the entire educational journey for both families and professionals statewide. Ms. Moody also noted the Center has now provided services to families in almost every county in the state in its four-year history. 374 children were served during the Center's first year of existence and 2,379 children have been served to date.

Trauma and Injury Prevention Division Update: Attacking the Opioid Epidemic

Katie Hokanson, Director Trauma and Injury Prevention Division provided an update on activities with a focus on attacking the opioid epidemic. Indiana usually is ranked between 15th and 17th nationally in overdose statistics. Katie noted that for the longest time Indiana's leading cause of death due to injury was motor vehicle accidents, which was the main focus of the Division's work. During the last couple of years deaths due to drug overdose began hitting the radar and they have continued to increase drastically since then.

Katie discussed the need to know the major drugs causing deaths to determine if we are seeing an increase in the use of heroin or synthetic opioids. She noted toxicology screenings are being done in Indiana to get a better understanding as to what drugs are responsible for the overdose deaths. We must first learn the root of the problem before we can successfully attack it.

Katie shared some of the ISDH efforts to combat this epidemic. Oral Health is working on education for dentists statewide on prescribing opioid pain killers. The Immunization Division is developing education for first responders regarding important vaccinations that are helpful in treating the spread of disease in these overdose victims as they are treating them. Chronic Disease, HIV/STD and MCH Divisions are also developing strategies to combat the epidemic by working on access to treatment. Public Health Preparedness is providing Naloxone stations around the state in case supplies are depleted so more can be obtained within hours not days.

Katie shared that the ISDH has and will continue to partner with IU/Fairbanks School of Public Health to ensure all policies and decisions are made with sound reasoning and foundations. The Trauma and Injury Prevention Division also has developed a website that is loaded with huge amounts of data and information. It is titled the "ISDH Stats Explorer". Katie explained that all data from this website can be downloaded. She stated there are monthly webcasts hosted by the Division. These monthly webcasts were established to get relevant information to the local health departments and anyone else who is interested in helping to combat the opioid crisis.

Extension for Community Health Outcomes (ECHO) Project Update

Joan Duwve, MD, MPH, Chief Medical Officer provided an update on the ECHO Project. This project has been adopted from the state of New Mexico through a collaboration with the Richard M. Fairbanks School of Public Health at IUPUI and the Indiana State Department of Health. There are 70 million infected with HCV worldwide. In New Mexico in 2004 there was an estimated 28,000 with HCV. By 2017, 53,000 patients tested positive for HCV antibody. The goals of Project ECHO are to develop capacity to safely and effectively treat HCV in all areas of New Mexico and to monitor outcomes; and to develop a model to treat complex diseases in rural locations and developing countries. Currently, Indiana's HCV rate is 2.5 times greater than the national rate and we are seeing more cases reported in the younger population. This is no surprise as it is due to injection drug use, street drug use, drug use while incarcerated as well as tattooing and physical contact with an infected person. The ECHO model consists of 4 components:

- Use technology to leverage resources
- Case based learning to master complexity
- Share best practices to reduce disparity
- Web-based database to monitor outcomes

The ECHO Mission is to democratize medical knowledge and get best practice care to underserved people all over the world. The goal is to touch the lives of one billion people by 2025.

ISDH Public Health Accreditation Update

Eden Bezy, Director, Office of Public Health Performance Management (OPHPM) provided an update on the progress of the ISDH accreditation process. Currently Indiana is one of eight states moving toward accreditation. Eden and her staff are currently working on several plans:

- Strategic Plan
- Workforce Development Plan
- Quality Improvement Plan

Eden also stated OPHPM is working on the State Health Assessment/State Health Improvement Plan, Branding Strategy, and the Performance Management Plan. Other outstanding items to be completed:

- Health Equity Statement
 - Policy or procedure for the development of interventions and materials that address areas of health inequity
 - Working with Office of Minority Health and federal partners on the best path forward
- Performance Management/Metric Visualization
 - ISDH must show how we are setting, following, and monitoring goals of the agency

Eden noted we are on track to declare our intent to apply around May 1, 2018.

Distribution

Ms. Goff thanked staff for the Professional new Hire and Separation Reports, Summary of Final Orders and Consent Decrees, and Variance Waiver Approvals.

Adjourn

Hearing no additional comments from the Board, staff and public, Ms. Goff adjourned the meeting at 11:55 am. The next meeting is scheduled for March 14, 2018.