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STATE BOARD OF HEALTH
OKLAHOMA STATE DEPARTMENT OF HEALTH
1000 N.E. 10th
Oklahoma City, Oklahoma 73117-1299

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Tuesday, February 14, 2012 11:00 a.m.

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R. Murali Krishna, Vice-President of the Oklahoma State Board of Health, called the 366th regular meeting of the Oklahoma State Board of Health to order on Tuesday, February 14, 2012, at 11:00 a.m. The final agenda was posted at 9:22 a.m. on the OSDH website on February 13, 2012, and at 10:00 a.m. at the building entrance on February 13, 2012.

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ROLL CALL

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Members in Attendance: R. Murali Krishna, M.D., Vice-President; Cris Hart-Wolfe, Secretary-Treasurer; Alfred Baldwin; Richard G. Davis, D.D.S.; Ronald Woodson, M.D.; Martha A. Burger; Barry L. Smith, J.D.
Members Absent: Jenny Alexopoulos, D.O., President; Terry R. Gerard, D.O.

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Central Staff Present: Terry Cline, Commissioner; Julie Cox-Kain, Chief Operating Officer; Henry F. Hartsell, Deputy Commissioner, Protective Health Services; Steve Ronck, Deputy Commissioner, Community and Family Health Services; Toni Frioux, Deputy Commissioner, Prevention and Preparedness Services; Mark Newman, Office of State and Federal Policy; Dan Durocher, Director of the Office of Accountability; Lloyd Smith, Director of Internal Audit; Don Maisch, Office of General Counsel; Ray Hankins, Chief Financial Officer; Leslea Bennett-Webb, Office of Communications; Joyce Marshall, Director of Performance Management; Keith Reed, Tom Welin, Janet Wilson, Ken Cadaret, Robin Botchlet, K.C. Ely, Commissioner's Office; Janice Hiner, VaLauna Grissom.

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County Health Department Staff and Visitors in attendance: (see list)

Call to Order and Opening Remarks: Dr. Krishna called the meeting to order and asked the Board to observe the customary moment of silence. Dr. Krishna recognized Dr. Bruce Dart, representing the Tulsa County Department of Health, as well as Brett Thomas with the Governor's Office. He indicated that the Commissioner's Report would follow the Review of Minutes on the agenda, allowing Dr. Cline to leave to give a presentation.

REVIEW OF MINUTES

Dr. Krishna directed Board attention to the minutes of the January 10, 2012, regular Board of Health Meeting.

Ms. Wolfe moved approval of the minutes of the January 10, 2012, regular meeting, as presented. Second Mr. Baldwin. Motion carried.

AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson
ABSENT: Alexopoulos, Gerard

COMMISSIONER'S REPORT

Dr. Cline extended his apologies to the Board as he would be leaving the meeting directly following his report to provide a presentation to the Downtown Rotary Club.

He provided an update on the Department's response to a data breach in 2011. The data breach was a result of a laptop being stolen from an employee's car. The Department response was very robust and included notices to victims, media notification, and policy changes. The Office of Civil Rights has

1 determined that the Department's response was satisfactory, therefore the case has been closed and no
2 financial penalties have been assessed to the Department. Dr. Krishna commended the staff for their
3 prompt and comprehensive response to the breach.
4

5 Next, Dr. Cline highlighted a recent Mission of Mercy event conducted in McAlester. The purpose of the
6 event was to provide free dental services to people in need. The event served approximately 1800 people.
7 There were approximately 1800 volunteers which included OSDH staff providing vaccinations.
8

9 Lastly, Dr. Cline updated the Board on the recent Executive Order signed by the Governor on February 6,
10 2012. The Executive Order banned tobacco use on all state owned and leased property. He commended
11 the Governor for her commitment to improving the health of all Oklahomans. As the number one
12 preventable cause of death (and a huge driver in terms of health care costs, and productivity), the
13 Governor is being very strategic in addressing the state's tobacco use (also ranked 48th in the country).
14 VaLauna Grissom is working to provide a video clip of the health related portion of the Governor's State
15 of the State address to the Board members. The report concluded.
16

17 Dr. Woodson personally expressed his appreciation for the Governor's actions and encouraged the Board
18 as a whole to express their appreciation to the Governor. Dr. Krishna proposed a Board of Health
19 resolution to accomplish this. Dr. Cline agreed to provide the Board a draft resolution in advance of the
20 March Board meeting for review and action during the March Board meeting.
21

22 APPOINTMENTS

23 Dr. Krishna directed Board attention to the Oklahoma Food Service Advisory Board appointment
24 information provided.
25

26 **Dr. Davis moved Board approval for the appointment of Jim Hopper to the Oklahoma Food**
27 **Service Advisory Board. Second Mr. Baldwin. Motion carried.**
28

29 **AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson**
30 **ABSENT: Alexopoulos, Gerard**
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32 PROPOSED RULEMAKING ACTIONS

33 PROTECTIVE HEALTH SERVICES, CHAPTER 667. HOSPITAL STANDARDS [NEW]

34 Dr. Krishna directed Board attention to Chapter 667.
35

36 **Dr. Woodson moved Board approval for Permanent adoption of amendments to Chapter 667.**
37 **Hospital Standards Rules as presented. Second Mrs. Burger. Motion carried.**
38

39 Dr. Krishna asked if there was discussion from the Board. Dr. Krishna inquired if the hospital performing
40 the delivery would implement the rule and who would be responsible for the cost? Hank Hartsell
41 responded that each hospital would implement the rule and the cost of the vaccine would be covered by
42 private insurance, the Vaccines For Children program, and Medicaid. Dr. Woodson inquired about the
43 vaccines given. Ken Cadaret, Chief of the Immunization Service, responded that this rule is consistent
44 with the national standard. There were no comments or questions from the public.
45

46 **AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson**
47 **ABSENT: Alexopoulos, Gerard**
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49 PUBLIC HEALTH LABORATORY PRESENTATION

50 Toni Frioux, MS, APRN, Deputy Commissioner for Prevention and Preparedness Services

PUBLIC HEALTH LABORATORY UPDATE

Board of Health Meeting

February 14, 2012



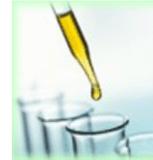
Toni D. Frioux, MS, APRN, CNP
Deputy Commissioner for Prevention and Preparedness



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PUBLIC HEALTH LABORATORY

Mission: Implement and provide essential public health laboratory services to state and private health providers



PUBLIC HEALTH LABORATORY

- PHL was established in 1908 in Guthrie.
- Moved to OKC to an abandoned building owned by the city and was located on East Second St.
- In 1937, the State Health Department took over the Union Soldier's Home and the PHL was moved into the hospital portion of this facility.



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PUBLIC HEALTH LABORATORY



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PUBLIC HEALTH LABORATORY



PUBLIC HEALTH LABORATORY



PHL moved to the current OSDH facility in 1972



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PUBLIC HEALTH LABORATORY

- Laboratory entrance
- Secure
- Biosafety signs



PUBLIC HEALTH LABORATORY

Security

- Minimum of 3 levels of security to get in laboratory



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PUBLIC HEALTH LABORATORY

Accessioning Section

- Shipping / receiving specimens
- Collection kits for influenza surveillance
- Quality control and quality assurance of testing materials



PUBLIC HEALTH LABORATORY

Immunology Section

- Arboviral Panel
- Hepatitis
- HIV
- Syphilis
- Tick Panel



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PUBLIC HEALTH LABORATORY

Microbiology Section

- Acts as a reference laboratory for hospitals and clinics
- Disease surveillance/ outbreak investigation support
- Bioterrorism testing on possible credible threats
- Participates in Laboratory Response Network (LRN)



PUBLIC HEALTH LABORATORY

Molecular Section

Participates in National PulseNet Network using pulse field gel electrophoresis (PFGE)



PUBLIC HEALTH LABORATORY

Molecular Section

Diagnose pertussis using polymerase chain reaction (PCR)



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PUBLIC HEALTH LABORATORY

Molecular Section

Second tier cystic fibrosis testing using Luminex technology



PUBLIC HEALTH LABORATORY

Newborn Screening

Screening for genetic disorders (50)

- Amino acids
- Biotinidase
- Congenital Hypothyroidism
- Congenital Adrenal Hyperplasia
- Cystic Fibrosis
- Fatty acids
- Galactosemia
- Hemoglobinopathies
- Organic acids



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PUBLIC HEALTH LABORATORY

Newborn Metabolic Screening Governing Statutes

- Requires State Board of Health to promulgate rules and regulations as accepted medical practice shall indicate
- Authority to mandate testing if sufficient evidence exists that the public has been negligent in accepting such practice and if the Board considers it in the public interest to do so
- Authority to set up laboratory facilities and use existing facilities for the performance of examinations and tests for the detection of these diseases and make a reasonable charge therefore.

63 O.S. 1-533 - 1-534



PUBLIC HEALTH LABORATORY

Mycology and Tuberculosis Section

- Rapid diagnosis of TB



- Provides Smear results within 24 Hours
- Drug susceptibility results within 28 days



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PUBLIC HEALTH LABORATORY

Virology

- Performs Influenza surveillance
- Performs CT/GC molecular testing
- Only Rabies testing laboratory within the state



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PUBLIC HEALTH LABORATORY

2011 Rabies Activity

Rabies Total	1059
Positive	59
Most common animals submitted:	
Cat	277
Cow	38
Dog	496
Horse	25
Skunk	88



PUBLIC HEALTH LABORATORY

Field Laboratory Operations

Monitors county health departments for CLIA compliance

Preparedness Training

Training for potential BT specimen collection throughout the state

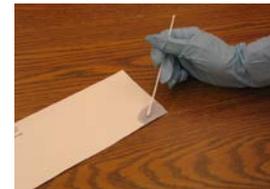


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PUBLIC HEALTH LABORATORY

Training Partners

- Hospital Laboratories
- County Health Depts.
- First Responders
- Environmental Specialists



PUBLIC HEALTH LABORATORY

STATPack

- 24/7 Telecommunication System
- 12 Oklahoma sentinel hospital sites
- Communication based on need of sentinel hospitals during emergency or routine events



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PUBLIC HEALTH LABORATORY

STATPack

- System allows real-time remote observation of samples and slides by PHL staff via live video feed
- Enhances response time during outbreaks, events of bioterrorism, and consultation on unknowns



PUBLIC HEALTH LABORATORY

BSL 3 Rooms and Bioterrorism

- Secure site
- Enables handling of select agents and white powders
- Contained operation for processing of samples, incubation of isolation media, extraction of DNA, and decontamination of products used without leaving the area



PUBLIC HEALTH LABORATORY

PHL Summary Data:	2011
Overall Specimens	606,022
Immunology	70,438
<i>Newborn Screening</i>	<i>441,290</i>
TB	5,080
Microbiology	6,152
Molecular	16,442
Virology	446
CT/GC	65,115
Rabies	1,059



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PUBLIC HEALTH LABORATORY

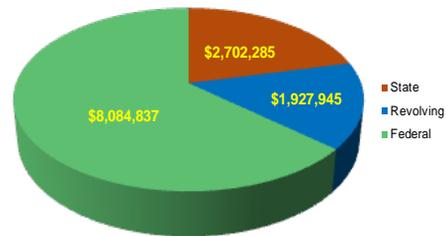
Pharmacy Services

– Provides specific pharmaceuticals to County Health Departments



PUBLIC HEALTH LABORATORY

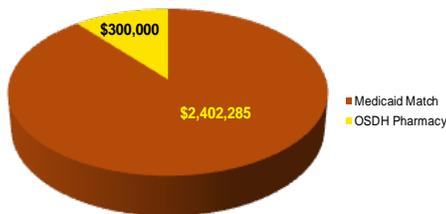
SFY-12 TOTAL BUDGET
\$12,715,067



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PUBLIC HEALTH LABORATORY

State Funds - \$2,702,285



PUBLIC HEALTH LABORATORY

Vision for the Future:

- Finalize selection and hiring of PHL Director
- Expand Newborn Screening Panel
- PHL Facility Expansion Project
 - Increase space
 - Increase testing capacity
 - Safety
 - Improve Public Health Emergency Response Capabilities
 - Improve efficiencies



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Toni invited the Board of Health members to tour the Public Health Laboratory following the Board meeting. Dr. Krishna thanked Toni for her presentation. The presentation concluded.

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COMMITTEE REPORTS

Executive Committee

Dr. Krishna indicated that the subcommittee rotation schedule would be placed on the March agenda for

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1 discussion.

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3 Dr. Krishna reminded the Board members that the March Board meeting will take place at the Bryan
4 County Health Department in Durant. March is also the timeframe in which Board members will be
5 assigned to the Nominating Committee for the election of officers. The Nominating Committee will make
6 its recommendations to the Board in June, the election will take place in June, and new officers will
7 become effective July 1, 2012.

8
9 Dr. Krishna directed attention to the forms titled Oklahoma Standard Authorization To Use or Share
10 Protected Health Information. The Oklahoma Health Information Exchange Act requires the State Board
11 of Health to adopt and distribute a standard authorization form and accompanying instructions to use or
12 share protected health information. Don Maisch, General Counsel for the OSDH, and Robn Green,
13 OSDH HIPAA Privacy Officer, provided an overview of the revisions to the standard form since initially
14 been adopted by the Board of Health in 2008.

- 15
- 16 • In the original form Section II (**Scope and Purpose for Sharing Information**) and Section III
- 17 (**Person/organization Receiving Information and Purpose for Sharing**) were deemed to be
- 18 redundant. The new form combines the language all under Section II.
- 19 • Section II B (**Information to be Shared**): The order of the Information was changed so that the
- 20 information deemed to be most sensitive is shown first. Other changes are:
 - 21 ○ Entire Medical Record parenthetical note added, “includes all records except
 - 22 Psychotherapy Notes”
 - 23 ○ HIV Records and STD Records were added since there is no longer a requirement for the
 - 24 statement in bold.
 - 25 ○ Medical Images was added
 - 26 ○ Radiology Films was changed to Radiology Reports
 - 27 ○ EKG Reports was changed to Cardiology Reports
- 28 • The statement in bold regarding communicable and noncommunicable diseases was removed.
- 29 • Under the Signature lines, “Company Address” was changed to read “Address of entity
- 30 authorized to release information”.
- 31 • The wording in the gray shaded box was changed from “The following information may only be
- 32 completed by” to “The following information is for administrative purposes and may only be
- 33 completed by an entity that is a “Program” under 42 C.F.R. Part 2 with respect to alcohol and
- 34 drug abuse records.”
- 35

36 **Ms. Wolfe moved Board approval to adopt the revisions to the Oklahoma Standard Authorization**
37 **Form as presented. Second Dr. Woodson. Motion Carried.**

38
39 **AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson**
40 **ABSENT: Alexopulos, Gerard**

41 42 **Finance Committee**

43 Following is the SFY 2012 Finance Report and Board Brief as of January 24, 2012.

- 44 • Payroll forecasted through June 30, 2012 including vacancies likely to fill within the current
- 45 budget period.
- 46 • Encumbrances shown as actual as of the report date.
- 47 • Expenditure forecasts limited to realistic amounts expected to spend out during the current budget
- 48 period.
- 49 • Surplus/(Deficit) is projected as of June 30, 2012.
- 50 • Issues remain with funds not being fully unobligated in both Health Statistics & Information
- 51 Technology and Prevention and Preparedness Services. New grants received mid-November for

1 Immunization Billing Project remain partially unobligated and funds dedicated to the Center for
2 the Advancement of Wellness continue to be committed to projects with the recent appointment
3 of a Director over that organization unit.

- 4 • Both areas are improved over last month's report, approaching a "Green Light" status and should
5 continue to improve with progress made in the respective program areas.
- 6 • The OSDH's budget performance rate has improved from 96.15% to 96.68% from the previous
7 month.
- 8 • There are two divisions with a "Yellow Light" status, Prevention & Preparedness Services and
9 Health Statistics & Information Technology.
- 10 • Funds remain unobligated in Prevention & Preparedness Services subsequent to the recent
11 creation of the Center for the Advancement of Wellness. The budget performance rating of
12 93.10% is improved over the last couple of months and is expected to continue to improve as
13 vacancies are filled and funds are encumbered.
- 14 • The "Yellow Light" status for Health Statistics & Information Technology is largely due to a
15 recently awarded Immunization Billing grant. The budget performance rating of 92.23% is
16 expected to continue improving as the grant budget is executed and funds are encumbered.
- 17 • Protective Health Services, Community & Family Health Services, and Public Health
18 Infrastructure remain in "Green Light" status from the previous month.

19 20 **Accountability, Ethics & Audit Committee**

21 Mr. Baldwin reported that there are no known significant audit issues or investigative issues to report at
22 this time.

23 24 **Public Health Policy Committee**

25 The Policy Committee met on Tuesday February 14, 2012. Dr. Woodson, Dr. Davis, Ms. Burger and
26 Mark Newman were present at the Oklahoma State Department of Health in Oklahoma City, Oklahoma.
27 Dr. Woodson served as Chair of the meeting. Mark Newman provided information about the OHIP and
28 department request legislation for 2012. Electronic copies of the bill tracking list have been sent to all
29 BOH members beginning last Monday and will continue to be sent each Monday throughout the
30 legislative session.

31
32 Mark Newman informed the committee of the bills on the House Public Health Committee agenda for this
33 afternoon. HB 2266, the Public Health Delivery Act, and HB 2267, the legislation to restore local rights
34 to communities regarding smoking in public places and workplaces, will be heard in committee today.

35
36 If members of the Board have any questions regarding any of the bills on the tracking list or any other
37 legislation that comes to their attention, please do not hesitate to contact Mark Newman for additional
38 information or to provide your input.

39
40 The next meeting of the Policy Committee will be on March 13, 2012.

41 42 **PRESIDENT'S REPORT**

43 Dr. Krishna directed attention to the Board schedule of 2012 Financial and Performance Dashboard
44 reports. In January the Board was given the proposed dashboard and asked to provide feedback. Please
45 provide any feedback or questions you might have regarding the dashboards to VaLauna Grissom.

46
47 Dr. Krishna recognized former Board of Health member Dr. Ann Warn for her recent appointment as the
48 Vice-Chair of the American Academy of Ophthalmology Advisory Council. He also commended Martha
49 Burger for her work on the United Way Committee, adding that she has been instrumental in garnering
50 community support to increase the budget.

51
52 Lastly, Dr. Krishna discussed the application of 3 dimensional printing technology in healthcare,

1 referencing a recent mandible transplant successfully utilizing this technology.

2 **PROPOSED EXECUTIVE SESSION**

3 **Ms. Wolfe moved Board approval to go into Executive Session at 12:11pm pursuant to 25 O.S.**
4 **Section 307(B)(4) for confidential communications to discuss pending department litigation and**
5 **investigations; pursuant to 25 O.S. Section 307(B)(1) to discuss the employment, hiring,**
6 **appointment, promotion, demotion, disciplining or resignation of any individual salaried public**
7 **officer or employee and pursuant to 25 O.S. Section 307 (B)(7) for discussing any matter where**
8 **disclosure of information would violate confidentiality requirements of state or federal law. Second**
9 **Mrs. Burger. Motion Carried.**

10 **AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson**

11 **ABSENT: Alexopulos, Gerard**

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13 **Ms. Wolfe moved Board approval to come out of Executive Session at 12:19 pm. Second Mr. Smith.**
14 **Motion carried.**

15 **AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson**

16 **ABSENT: Alexopulos, Gerard**

17
18 The Board returned from executive session at 12:19 p.m. There was no action taken.

19
20 **ADJOURNMENT**

21 **Mrs. Burger moved to adjourn. Second Mr. Baldwin. Motion carried.**

22 **AYE: Baldwin, Burger, Davis, Krishna, Smith, Wolfe, Woodson**

23 **ABSENT: Alexopulos, Gerard**

24
25 The meeting adjourned at 12:20 p.m.