

**State of Board of Health  
December 3, 2020 – 9:00 a.m.  
Virtual Meeting – WebEx**

Due to COVID-19, this meeting was conducted in an all-virtual environment.

**Members Present:** Faye Prichard, Chair; Gary Critzer, Tommy East; James Edmondson; Elizabeth Harrison; Linda Hines, RN; Anna Jeng, ScD; Patricia Kinser, PhD; Wendy Klein, MD; Benita Miller, DDS; Holly Puritz, MD; Jim Shuler, DVM; Stacey Swartz, PharmD; Katherine Waddell; and Mary Margaret Whipple.

**VDH Staff Present:** Dr. Norm Oliver, State Health Commissioner; Dr. Laurie Forlano, Deputy Commissioner for Population Health; Joe Hilbert, Deputy Commissioner for Governmental and Regulatory Affairs; Mylam Ly, Policy Analyst; Dr. Parham Jaberi, Chief Deputy Commissioner for Public Health and Preparedness; Alex Jansson, Policy Analyst; Mike McMahon, Acting Deputy Commissioner for Administration; Maria Reppas; Director of the Office of Communications; John Ringer, Director of Public Health Planning and Evaluation; Stephanie Gilliam, Deputy Director for Budget; Tammie Smith, Public Relations Coordinator; Richard Watson, Video Conference Engineer; Brad Bradley, Public Health Preparedness Systems Manager; Dwayne Roadcap, Director, Office of Drinking Water; Heather Board, Acting Director, Office of Family Health Services; Consuelo Staton, MEd., State Resource Mothers Program Coordinator, Office of Family Health Services.

**Other Staff:** Robin Kurz, Senior Assistant Attorney General; Grant Kronenberg, Assistant Attorney General.

**Call to Order**

Ms. Prichard called the meeting to order at 9:15am.

**Introductions**

Ms. Prichard welcomed those in attendance to the meeting. Ms. Prichard then started the introductions of the Board members and VDH staff present.

**Review of Agenda**

Mr. Hilbert reviewed the agenda and the items contained in the Board's virtual binder.

**Proclamation for Bruce Edwards**

Ms. Prichard read a proclamation in honor and remembrance of former Board of Health Chair, Bruce Edwards. It was adopted by consensus.

**Approval of Septemer 3, 2020 Minutes**

Dr. Puritz made the motion to approve the minutes from the September 3, 2020 meeting with Dr. Klein seconding the motion. The minutes were approved unanimously by roll call vote.

### **Commissioner's Report**

Dr. Oliver provided the Commissioner's Report to the Board. He discussed the novel coronavirus (COVID-19) situation and response:

- Disease Burden and Transmission
- Testing
- Containment
- Long Term Care Facilities
- Community Mitigation
- Communications
- Vaccination
- Funding Allocation

There was discussion concerning when a vaccine would be available and plans for distribution and prioritization, the importance of consistent and clear messaging, and best practices for the general public as numbers of cases rise and preventative measures continue.

### **Wastewater Surveillance for COVID-19**

Dr. Jeng presented an overview of the wastewater surveillance project in the Hampton Roads area with HRSD staff Kyle Curtis and VDH staff Marcia Degen from the Office of Environmental Health Services. This project has involved monitoring wastewater for COVID-19 markers to track and evaluate the spread of COVID-19.

### **Regulatory Action Update**

Mr. Hilbert reviewed the summary of all pending VDH regulatory actions. Since the September 2020 meeting the Commissioner has approved the two following regulatory actions on behalf of the Board while the Board was not in session:

- Certification of Community Health Workers (12VAC5-402) – Notice of Intended Regulatory Action – Approved NOIRA
- Regulations Governing Vital Records – (12VAC5-550) Final Action Withdrawn

Mr. Hilbert advised the Board that there are 13 periodic reviews in progress:

- Virginia Emergency Medical Services Regulations (12VAC5-66)
- Regulations for the Repacking of Crabmeat (12VAC5-165)
- Regulations Governing Eligibility Standards and Charges for Medical Services to Individuals (12VAC5-200)
- Methodology to Measure Efficiency and Productivity of Health Care Institutions (12VAC5-216)
- Regulations of the Patient Level Data System (12VAC5-217)
- Rules and Regulations Governing Outpatient Data Reporting (12VAC5-218)
- Virginia Medical Care Facilities Certificate of Public Need Rules and Regulations (12VAC5-220)
- Regulations for the Submission of Health Maintenance Organization Quality of Care Performance Information (12VAC5-407)

- Certificate of Quality Assurance of Managed Care Health Insurance Plan Licensees (12VAC5-408)
- Regulations for the Licensure of Hospitals in Virginia (12VAC5-410)
- Regulations Governing the Virginia Physician Loan Repayment Program (12VAC5-508)
- Guidelines for Virginia General Assembly Nursing Scholarships (12VAC5-510)
- Regulations for Identification of Medically Underserved Areas in Virginia (12VAC5-540)

### **Public Comment Period**

Following a short break, there was one public speaker who had signed up, but was not present at the meeting. There were no public comments.

### **Regulations of Waterworks (12VAC5-590) – Final Amendments**

Mr. Roadcap presented the final amendments. The purpose of this action is to amend the *Waterworks Regulations* to update and clarify the requirements for waterworks to follow in construction, operation, and treating, monitoring, and testing drinking water that are necessary to protect public health and ensure they provide reliable, safe drinking water to Virginians.

Since promulgation by the Board of Health in 1993, sections of the *Waterworks Regulations*, primarily the definitions (12VAC5-590-10) and Part II, have been amended as needed to incorporate federal requirements in the *Safe Drinking Water Act* (42 USC § 300f *et seq.*) and National Primary Drinking Water Regulations (40 CFR Parts 141, 142, and 143). VDH completed the most recent amendment in November 2016 to incorporate the requirements in the Revised Total Coliform Rule (RTCR), 40 CFR §§ 141.851 through 141.861, in the *Waterworks Regulations*. VDH made these amendments through “exempt” regulatory actions that were necessary for the state to retain primary enforcement responsibility for waterworks in Virginia. See § 2.2-4006 A 4 of the *Code of Virginia*. From 1993 to the present, the balance of the *Waterworks Regulations* have remained unchanged.

The VDH Office of Drinking Water, the Waterworks Advisory Council, and a Regulatory Advisory Panel consisting of waterworks stakeholders, collectively recommend that Parts I and III of the current *Waterworks Regulations* be updated in the areas of waterworks’ permitting, design, and construction, and Part II be amended to clarify operating requirements and improve overall readability. As part of the agency’s effort to clarify and improve the readability of the *Waterworks Regulations*, VDH also addressed consistent use of defined terms and technical terms across the entire document. The regulatory action follows these recommendations and also incorporates the following: current water treatment technologies; current monitoring and control technologies; changes to water consumption patterns resulting from shifts in consumer use and water-saving plumbing fixtures; changes to source water quality and availability due to increased water demands; and new state laws and regulations governing source water supply planning and withdrawal.

Ms. Hines made a motion to approve the final amendments to the Regulations of Waterworks with Dr. Jeng seconding the motion.

There was discussion around how many problems with waterworks have occurred in the past several years.

The motion was approved unanimously by roll call vote.

#### **Regulations for Adult Comprehensive Sickle Cell Clinic Network (12VAC5-191) – Fast Track Amendments**

Ms. Board presented the fast track amendments. The purpose of this regulation is to be in compliance with the Code of Virginia and to implement an adult comprehensive sickle cell clinic network. Sickle cell disease (SCD) is a group of inherited, lifelong blood disorders that affects the red blood cells. In the United States, SCD disproportionately affects African Americans and those with a Hispanic background. Throughout the world, the disease affects those from the Middle East, Italy and Greece. Sickle cell affects every organ in the body. Complications include severe pain, stroke, acute chest syndrome, organ damage, and in some cases premature death. Increased sickle cell-related mortality has been shown in 18-30 year olds, with the highest rate of acute care encounters and re-hospitalizations in this age group compared to the older group of patients who would be expected to have increased illness and complications due to advancing age. According to VDH data, the rate of emergency department (ED) visits for sickle cell disease in Virginia was highest among the 18-30 age group at 53.8 ED visits per 10,000 ED visits and 53.1 ED visits per 10,000 ED visits in 2018 and 2019 respectively.

The short-term goal of this regulatory change is the establishment of an adult comprehensive sickle cell clinic network. The long-term goal is a reduction in the rate of ED visits for adults with sickle cell in the 18-30 age group and an increase in the number of adults who continue into specialty care and establish a medical home with a specialty care provider.

Dr. Puritz made a motion to approve the fast track amendments to the Regulations for Adult Comprehensive Sickle Cell Clinic Network with Dr. Jeng seconding the motion.

The motion was approved unanimously by roll call vote.

#### **Regulations for Certification of Doulas (12VAC5-403) – Proposed Amendments**

Ms. Board presented the proposed amendments. The purpose of this regulation is to be in compliance with the Code of Virginia and to provide standardized doula certification requirements in the Commonwealth of Virginia. Certification requirements for state-certified doulas shall reflect national best practices pertaining to community-based doula training and certification.

Individuals practicing as state-certified doulas will have attained the required training, through entities approved by the Board of Health, to provide coaching, outreach, and navigation services to Virginia's most hard-to-reach pregnant women to ensure that disadvantaged populations are equipped with the knowledge to receive the most appropriate medical and social supports to meet their needs. A standardized doula certification model is also beneficial to supporting and maintaining the doula workforce. This regulatory action will ensure that the content is clearly written.

Mr. Edmonson made a motion to approve the proposed amendments to the Regulations for Certification of Doulas with Mr. Critzer seconding the motion.

There was discussion about the intent of the regulations and input from stakeholders, what a curriculum might look like, what organizations would be able to certify, the certification in other states, and the impact on practicing doulas if they are not certified (e.g. would they be able to enter the hospitals with patients).

After discussion the motion to approve was withdrawn and a motion to send back the regulations for further development was made by Mr. Edmonson. The motion was seconded by Dr. Shuler.

The motion was approved 13 to 2 by roll call vote.

### **Board of Health Annual Report/Plan for Well-Being Update**

Dr. Forlano presented an update on the Plan for Well-Being (The Plan). The Plan outlines a path for improving the health and well-being of Virginians through four aims, 13 goals, and 29 measures.

Of the 29 measures, 15 show improvement, when compared to baseline measures, although at different degrees. Of these, three measures (Disability-Free Life Expectancy, Percent of High School Graduates Enrolled in an Institution of Higher Learning, and Teen Pregnancy Rates) have exceeded the goal that was originally set forth in The Plan. The remaining 14 measures have evidenced little to no change, or have decreased further away from the intended goal.

Over the next year, a Plan for Well-Being 2.0 will be developed.

Dr. Klein made a motion to approve and accept the annual report with Dr. Kinser seconding the motion.

The motion passed unanimously by roll call vote.

### **Legislative Update**

Mr. Hilbert presented the legislative update from the 2020 General Assembly Special Session. He highlighted bills that would have an impact on VDH's work. Subject areas included the following:

- Bills That Passed
  - Outbreak/Communicable
  - Disease Data Reporting
  - Patient
  - Visitation Policies
  - Immunity from Civil Liability for Certain Health Care Providers
- Bills That Failed
  - Testing Prioritization
  - Immunization Restrictions
  - Board

- and Commissioner's Emergency Rulemaking Authority
- Other
- Appropriation Act Language

Mr. Hilbert also provided the Board with an update concerning the status of the policy recommendations that it submitted to the Governor in September, 2020.

### **Budget Update**

Ms. Gilliam presented the budget update from the 2020 General Assembly Special Session. She described the COVID-19 response CARES funding and the cooperative budget that funds the local health departments. She discussed the budget amendments that came out of the Special Session and the instructions provided for consideration of reinstating any funding if available.

Ms. Gilliam also provided the Board with a description of budget amendment requests submitted by VDH to the Administration for possible inclusion in the Governor's Budget Bill that will be considered by the 2021 General Assembly.

### **Other Business**

There was no other business discussed.

### **Adjourn**

Meeting adjourned at 2:48pm.