



**Delaware County Health Department  
Board of Health Meeting  
June 20, 2023**

**ATTENDEES**

Rosemarie Halt, Chair  
Lily Higgins, MD, Vice Chair  
Oni Richards  
Annemarie Hirsch  
P.J. Brennan, MD

**Meeting Minutes**

- I. There being a duly convened quorum, Chair Rosemarie Halt called the meeting to order at 6:01 p.m.
- II. Chair Announcements
  1. A Board of Health Executive Session was held on June 4.
  2. Lora Werner, Deputy Director DCHD, is taking the place of Director Lyon at this meeting due to vacation.
- III. Public Comment – none
- IV. Approval of minutes – motion made by Rosemarie Halt, P.J. Brennan approved, Lily Higgins seconded.
- V. Director Updates – none.
- VI. New Business
  1. Lora Werner introduced Population Health Administrator, Dr. Gifty Key and Population Health Manager, Rasheeda Williams. Dr. Key presented on DCHD’s Cooking for Health pilot program, which DCHD implemented in March 2024.
    - a. The Board of Health members and past attendees at Board of Health meetings previously expressed interest in hearing more about what DCHD is doing related to wellness and DCHD’s work in the community.
    - b. This pilot connects to DCHD’s Community Health Improvement Plan chronic disease priority.
    - c. DCHD organized 4 2-hour classes in March to promote healthy eating and educate community members who are prediabetic or at high risk for type 2 diabetes.
    - d. Thirty-five community members attended over the four-week series and shared positive feedback about the experience. Approximately 30 members were able to get screenings completed and assistance with support if needed. Age ranges of participants were 26-86 years of age. Everyone left with a healthy meal, resources, groceries, and giveaways.
    - e. Lessons learned include improving promoting programing and reaching community members, and that evening classes were the most attainable for the Chester attendees.
    - f. DCHD’s Mindfulness Monday programming (aligning with the Community Health Improvement Plan whole person care priority) is continuing through the summer. Mindfulness Mondays focus on self-care and positive activities focusing on mental health.

**Question: Any follow up from participants to see if the results are sustainable?** All participants had insurance and can follow up with their primary care providers. The program used Healthy Measures, which will send the screening results to their providers.

**Question: Youngest participants were 26; are we reaching out to younger kids? Also, doing anything with school districts?** Focus was not on children for this pilot. Can consider that for future events and consider going into the schools. The State has jurisdiction over school district lunch programs. The DCHD school nurse liaison is a helpful connection for DCHD public health programming and school communities. Some programs need to be parent-based; could do parent-focused class and student based.

## 2. DCHD's FY 24/25 Budget

- a. Presentation by Chris Walmsley, CFO.
- b. DCHD has continued to leverage non-county funding to support its operations.
- c. The budget estimates are projected to support a 5-year period of growth in staffing, as well as operational expense as the department continues to master all foundational public health services.
- d. DCHD's FY24/25 projected expense budget has decreased by 8%, a drop of \$1,458,470 from FY23/24.
- e. DCHD's revenue expected from non-county sources has remained consistent with only a 3% variance from FY23/24 to FY24/25.
- f. Despite the 3% decrease to overall non-county revenue, the expected County contribution to DCHD's budget is expected to drop by approx. 15%.

**Question: What do you project the county contribution to be?** The projected county contribution to DCHD's overall budget has been decreasing: 51% in FY22/23, 38% in FY23/24, and 35% in FY24/25. Non-county revenue has been covering 65% of the department's expenses. The 35% of expenses requiring a County contribution has also been supported by federal ARPA funds and will continue to receive ARPA support through 2026.

**Question: How are vacancies affecting the budget?** The department's vacancies are putting a strain on the existing workforce and impacting operational efficiency. According to the Fair Labor Standards Act, hourly employees must receive overtime pay for hours worked beyond 40 hours in a workweek at one and a half times their regular pay rate. Additionally, unfilled positions lead to increased stress and pressure on the department, compounding the effects of employee turnover. Addressing turnover and vacancies will likely require the department to offer higher wages and more flexible schedules, affecting the personnel budget. As the DCHD grows, there is a need for more staff, which will further impact the budget. Furthermore, filling vacancies with existing staff increases training costs, adding to the budget strain.

**Question: Is this information being shared with the community?** The budget is presented to the county council and Board of Health at a public meeting. However, the DCHD continues to collect data every year to enhance its communication with the community. The department has invested in data optimization and modernization projects launching this year that will enhance communication with the community. The DCHD is 100% subsidized due to ARPA support, which subsidizes the County's contribution to the Health Department until 2026.

**Question: Is DCHD quantifying in-kind contributions?** The DCHD is currently unable to fully measure the impact of non-monetary contributions. However, the department is working on utilizing its data more

effectively to communicate this impact. By making use of non-monetary contributions, the overall expenses of the department have decreased, leading to a reduced need for financial support from the County. The department has been efficiently using available resources to promote public health. An example of an in-kind contribution that has helped strengthen the department's workforce is the technical assistance provided by the State. The State offers training and technical assistance to all recipients of the Public Health Infrastructure Grant and fulfills requests at no cost. The DCHD will continue to make use of public health resources, and the impact of this will be assessed by tracking the need for County support at the end of each fiscal year budget. While the department is improving its ability to analyze its data, the best way to track in-kind contributions would be to measure the expenses avoided due to the department's ability to leverage resources that would otherwise need to be budgeted annually.

3. Board of Health Strategic Plan Document
  - a. Presented by Lora Werner
  - b. Director, Deputy Director, and CFO are working on strategic priorities and creating strategies. Will share at September Board of Health meeting.
  - c. Consolidated report questions

**Question: Epidemiologist reported diabetes is 5th leading cause of death. Would DCHD consider designing future wellness programming focusing on heart health? Interesting that percentages for surrounding counties (except for Philadelphia) had lower rates of diabetes than Delco.** DCHD acknowledged the importance of healthy heart programming and noted that Cooking for Health pilot included exercise and heart health aspects.

VII. Public Comment - No comments.

VIII. Motion to adjourn made by Chair Rosemarie Halt; approved by Lily Higgins, seconded by P.J. Brennan.

Next meeting is September 19 at the Yeadon Wellness Center, 125 Chester Ave., Yeadon, PA. There will be public notice of the location.

There being no further business, the meeting was adjourned at 6:53 p.m.

Respectfully submitted,

Lora Werner, Deputy Director