

**MINUTES OF MEETING  
MISSISSIPPI STATE BOARD OF HEALTH  
JANUARY 15, 2003  
10:00 A.M.**

The Mississippi State Board of Health met in regular session on Wednesday, January 15, 2003, in the Auditorium of the Osborne Building, Jackson, Mississippi at 10:00 a.m. with the following members present:

District 1	Shelby C. Reid, M.D., Corinth
District 1	Ruth Greer, R.N., Holly Springs
District 2	Duane F. Hurt, D.D.S., Greenwood
District 3	R. A. Foxworth, D.C., Chairman, Jackson
District 3	Mary Kim Smith, R.N., Brandon
District 4	Norman Price, McComb
District 4	Briggs Hopson, Jr., M.D., Vicksburg
District 5	Ted Cain, Diamondhead
District 5	Larry Calvert, Vice Chairman, R.Ph., Gulfport

**STATE-AT-LARGE**

Alfred E. McNair, Jr., M.D., Ocean Springs  
Janice Conerly, Collins

**ABSENT**

District II	Walter C. Gough, M.D., Drew
State-At-Large	H. Allen Gersh, M.D., Hattiesburg

**OTHERS PRESENT**

Brian W. Amy, MD, MHA, MPH, State Health Officer  
Kaye Bender, Ph.D., Deputy State Health Officer  
Danny Miller, Director, Policy and Planning  
Buck Ross, Director, Office of Administrative Services and Technical Support  
Jim Craig, Director, Emergency Medical Services  
Bob Goff, Director, Division of Radiological Health

The meeting was called to order by the Chairman. He welcomed Dr. Brian Amy as the new State Health Officer and the following new Board members: Ruth Greer, R.N.; Briggs Hopson, M.D.; Norman Price; Alfred McNair, M.D.; and Mary Kim Smith, R.N. who was reappointed.

The first item of business was the approval of the minutes of the October 9, 2002 Board of Health meeting. Upon motion of Dr. McNair, seconded by Dr. Hurt, the minutes were approved.

Mr. Buck Ross, Director, Office of Administrative Services and Technical Support, presented the Personnel Report covering the December, 2001 through November, 2002 and the Financial Report covering the period July 1, 2002 through November 30, 2002.

Dr. McNair moved that the Personnel and Financial Reports be accepted. The motion was seconded by Ms. Smith and approved.

Dr. Amy then presented the State Health Officer's Update commenting on the following:

1. Commented about the agency's new website which is now customer oriented and of better service to the people of Mississippi. He introduced Jim Newkirk who is responsible for the development of the website.
2. Presented the reorganization of the workforce and organizational structure of the department.

Dr. Bender then presented information regarding a change in the legislative agenda previously approved by the Board. At the October, 2002 meeting, the Board approved authorizing the agency to secure a bond bill for the purpose of laboratory renovation. Since that time, an assessment was completed and determined that a renovation of the existing building may not be in the best interest of the public. Working with the Bureau of Buildings and Grounds, Department of Finance and Administration, bids were solicited to select an architectural firm to conduct an assessment of the current laboratory and provide a plan for either renovating or relocating the laboratory. Dale and Associates Architects of Jackson was awarded the bid. Based on a recommendation of the Bureau of Building and Grounds, it is requested that the Board delay the request for the bond bill to the 2004 Legislative Session until the work by Dale and Associates has been completed. The Board concurred with the recommendation to delay the bond bill for laboratory renovation.

Ms. Samantha Heard with the American Heart Association, and a member of the Community for a Clean Bill of Health, presented a legislative request for the Board's consideration to endorse legislation to increase the cigarette excise tax in Mississippi by 50-cents a pack.

After comments by several Board members, Dr. Hopson moved that this request be referred to the Legislative Committee of the Board for evaluation. The motion was seconded by Dr. McNair. All members voted in favor of the motion with opposing vote by Mr. Calvert.

The Board then heard recommendations regarding the Office of Licensure:

**Proposed Regulations Governing Licensure of Child Care Facilities - Intent to Adopt; and Proposed Revisions to Regulations Governing Licensure of Child Care Facilities for 12 or Fewer Children in the Operator's Home - Intent to Adopt**

Mrs. Conerly, Chair of the Board Child Care Committee, reported that as a result of six public hearings that the committee hosted during November, 2002, a meeting of the Child Care Advisory Council and a committee meeting on December 4, 2002, in which 55 child care providers participated, draft #4 of the child care regulations has been developed. The Child Care Committee did not change the ratios in draft #4 but left the increase in fees in the draft because of the need for the program to be self-sufficient. It is recommended that draft #4 be approved as an intent to adopt for both Regulations Governing Licensure of Child Care Facilities; and Revisions to Regulations Governing Licensure of Child Care Facilities for 12 or Fewer Children in the Operator's Home.

Upon motion of Dr. Hurt, seconded by Dr. McNair, the Board approved an intent to adopt for the above regulations for Child Care.

Ms. Smith, Chair of the Board Long Term Care Committee, reported that the committee met on December 10, 2002 to discuss the problem encountered in drafting regulations that would be consistent with the statute regarding fingerprinting/background checks. A meeting with Senator Bunky Huggins resulted in an agreement for legislation to be introduced which would clarify the statute. Therefore, the committee recommends delaying a change in regulations until the status of the legislation can be ascertained. If the legislation has been passed in time for final adoption to be filed for the April Board meeting, the committee will pursue that option.

Other items that will require some revision include the regulations regarding TB skin testing for admission to long-term care facilities; the annual TB skin test surveillance process; and ensuring that the regulations for personal care homes are consistent with SB 2191 from the 2002 Legislative session. The committee also discussed the surveyor's interpretation of the nursing ratio of 2.80 per 24 hours.

Upon motion of Dr. Hopson, seconded by Dr. McNair, the Board voted to accept the report of the Long Term Care Committee.

Dr. Bender then presented for the Board's consideration, the following appointments to various advisory councils:

#### **Council of Advisors for Respiratory Practitioners**

Larry H. Conway, RRT - Therapist

Term of Office: January 1, 2003 - December 31, 2005

Bill Barnes - Public Member

Term of Office: January 1, 2003 - December 31, 2005

Michael R. Barlow, M.D. - Physician

Term of Office: January 1, 2003 - December 31, 2005

Barbara Butiro, CRT - Therapist (Reappointment)

Term of Office: January 1, 2003 - December 31, 2005

Upon motion of Dr. McNair, seconded by Dr. Hurt, the Board approved the above appointments to the **Council of Advisors for Respiratory Practitioners.**

#### **Council of Advisors for Occupational Therapy**

Cheri Nipp, OT - Therapist

Term of Office: January 1, 2003 - December 31, 2005

Heather Sudduth, OT - Therapist (Reappointment)

Term of Office: January 1, 2003 - December 31, 2005

Upon motion of Dr. McNair, seconded by Ms. Smith, the Board approved the above appointments to the **Council of Advisors for Occupational Therapy.**

#### **Council of Advisors for Speech-Language Pathology/Audiology**

Dr. Robert Oyler, CCC-A - Audiologist

Term of Office: January 1, 2003 - December 31, 2005

Charles G. Marx, CCC-A - Audiologist (Reappointment)

Term of Office: January 1, 2003 - December 31, 2005

Upon motion of Dr. Hopson, seconded by Ms. Smith, the Board approved the above appointments to the **Council of Advisors for Speech-Language Pathology/Audiology.**

#### **Council of Advisors for Hearing Aid Specialists**

Edward F. Warren, III - Public Member

Term of Office: July 1, 2003 - June 30, 2006

Dr. Barbara A. Hanners, CCC-A - Audiologist  
Term of Office: July 1, 2003 - June 30, 2006

Deborah T. Fortenberry - Hearing Aid Specialist (Reappointment)  
Term of Office: July 1, 2003 - June 30, 2006

John R. Young, Jr., M.D. Otolaryngologist (Reappointment)  
Term of Office: July 1, 2003 - June 30, 2006

Upon motion of Ms. Smith, seconded by Dr. McNair, the Board approved the above appointments to the **Council of Advisors for Hearing Aid Specialists**.

Dr. Hurt, Chair of the Board Committee on Trauma, presented for “intent to adopt” the following **Amendments to Existing Trauma Regulations**:

Section II, Page II-3

Add the following definitions:

“(24)” Eligible Physicians - Trauma/General Surgeons, Orthopedic Surgeons, Neurosurgeons and Anesthesiologists who provide health care services to a trauma patient at a trauma center, such service to be directly related to the medical treatment of the trauma case, who is uncompensated for the delivered service.”

Ms. Smith moved the Board approve the above **Amendment to Existing Trauma Regulations** for an “intent to adopt”. The motion was seconded by Dr. McNair and unanimously approved.

Dr. Hurt then presented for an “intent to adopt” a recommendation from the Mississippi Trauma Advisory Committee (MTAC) for **Amendments to Existing Trauma Regulations**. The following is a summary of the requested amendments:

1. Section VI, Page VI-2

Add the following amendment

All state designated patients must have a primary diagnosis of ICD-9 diagnosis code 800-959.9;

Plus any one of the following:

- Transferred between acute care facilities (in or out)
- Admitted to critical care unit (no minimum)
- Hospitalization for three or more calendar days
- Died after receiving any evaluation or treatment
- Admitted directly from Emergency Department to Operating Room for major procedure, excluding plastics or orthopedic procedures on patients that do not meet the three day hospitalization criteria
- Triage (per regional trauma protocols) to a trauma hospital by pre-hospital care regardless of severity
- Treated in the Emergency Department by the trauma team regardless of severity of injury

The following primary ICD-9 diagnosis codes are excluded and should NOT be included in the trauma registry:

- ICD-9 Code 905-909 (Late effects of injuries)
- ICD-9 Code 930-939 (Foreign bodies)

- Extremities and/or hip fractures from same height fall in patients over the age of 65.

Upon motion of Ms. Smith, seconded by Dr. McNair, the Board approved an “intent to adopt” to the **Amendments to Existing Trauma Regulations**.

Mr. Bob Goff, Director, Division of Radiology, presented for the Board’s consideration the nomination to the Mississippi Radiation Advisory Council. The Mississippi Radiation Protection Law of 1976 established a radiation advisory council to advise the MSDH on radiation issues. The statute designates that one member of the council be appointed from the Mississippi Radiological Society. The Mississippi Radiological Society has nominated Dr. Charles Pringle to serve a second term as a representative.

Upon motion of Dr. Hopson, seconded by Dr. McNair, the Board approved the appointment of Dr. Pringle to the Mississippi Radiation Advisory Council.

Dr. Bender then presented the report of the Board J-1 Visa Committee. The Committee met on January 10, 2003 to review the site predetermination applications for four potential J-1 visa placements. The Committee approved four applications at this time. Dr. Amy offered comments on behalf of Dr. Gersh regarding rural healthcare providers and facilities across the state. Any reduction of financing of healthcare would have a dramatic impact on the infrastructure level of services in the state. The J-1 Visa Committee has tasked the Office of Science to provide the Board an evaluation on access in counties to evaluate changes in funding that affect both the infrastructure and the level of services.

Upon motion of Dr. McNair, seconded by Ms. Smith, the Board accepted the J-1 Visa Report.

Mr. Calvert then presented the Report of the Board Committee on Environmental Health. The Committee met on January 9, 2003 to discuss problems regarding potential discrepancies identified in the individual onsite wastewater program in Rankin County. Personnel and potential litigation issues were discussed in executive session, and no action was taken. In open session, the committee heard from three members of the public regarding the issues they encountered in attempting to resolve these issues.

After having reviewed all of the available information, the committee recommends the following steps for those systems that have been identified where the property owner was given improper system recommendations, and the house is now substantially completed.

1. Provide the best possible design and/or repair to ensure that the system does not malfunction and that the effluent remains on the property.
2. Work with Rankin County to accept a contingent approval for the system that would include the following: notification of the property owner that the original recommendation may have been improper and that the Department will work with the property owner to provide the best possible design to ensure proper sewage disposal; agreement from the property owner that steps will be taken to ensure proper maintenance; permission for the Department personnel to make periodic inspections of the system to ensure proper sewage disposal; and work with the Department of Environmental Quality and the Rankin County Board of Supervisors to properly address any malfunctioning systems that may occur.
3. Consult with the Rankin County Board of Supervisors and the Department of Environmental Quality to address the need for a central system in this area.

Dr. Amy then commented that he had requested the State Auditor to evaluate the wastewater program’s performance and activities. In addition, the entire wastewater program is being re-engineered by a new office of organizational quality to ensure error-free performance, quality

service and customer satisfaction. This statewide evaluation is projected to take at least 180 days. He also recommended to the Board that in some counties the agency will not be able to provide the general supervision over the design, construction, operation and maintenance of individual onsite wastewater disposal systems with flows substantially equivalent to a single family residential generator. While unavoidable and inconvenient, existing statute provides an alternative for those property owners who choose not to wait until the wastewater program services resume in affected counties. In affected counties the agency will, pursuant to Section 41-67-3 of the Mississippi Code, accept professional engineer provided services in lieu of our own.

Upon motion of Ms. Smith, seconded by Dr. Reid, the Board accepted the report of the Board Committee on Environmental Health.

Mr. Harold Armstrong then presented the **Proposed FY 2004 STATE HEALTH PLAN** for an “intent to adopt”. Changes proposed at this time are complete statistical updates of all chapters in the current State Health Plan.

Upon motion of Dr. Hopson, seconded by Mr. Price, the Board approved for an “intent to adopt” the proposed changes to the **FY 2004 STATE HEALTH PLAN**.

Mr. Bruce Brackin, Environmental Epidemiologist, presented **Proposed Recommendation for Reportable Diseases**. Varicella is a common disease of childhood, which is becoming less common as the varicella vaccine is given more. With smallpox being on the list of possible bioterrorism agents, and varicella being one of the few diseases which could mimic smallpox, each case of adult varicella must be investigated to confirm the diagnosis, and to rule out smallpox. Varicella in adults is uncommon, and the reporting of it will also act as a sentinel event to monitor varicella occurrence. It is being recommended to add varicella in persons >15 years to the list of Class I reportable diseases, reportable within 24 hours of first knowledge or suspicion of the diagnosis.

Dr. McNair moved the board approved the request for adding varicella in persons >15 years to the list of Class I reportable diseases. The motion was seconded by Dr. Hopson and unanimously approved.

Dr. Bender then requested that the Board defer the request to add cancer as a reportable disease due to the staff analysis not being complete.

Next item was Old Business and there was none.

Under New Business, Mr. Calvert again welcomed the new members to the Board.

Upon motion of Dr. McNair, seconded by Dr. Hopson, the Board voted to adjourn.

Meeting adjourned at 11:35 a.m.

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R. A. Foxworth, D.C.  
Chairman

Brian W. Amy, MD, MHA, MPH  
Secretary and Executive Officer

