



## The Task Force to Strengthen the Health and Promote the Environment of South Carolina

2100 Bull Street  
Columbia, SC 29201

### Health Subcommittee

June 17, 2021

#### Minutes

The SHaPE SC Health Subcommittee met on **June 17, 2021**, at **3:00 pm** virtually via MS Teams. The meeting was called to order and the following members were in attendance:

#### **Attending virtually:**

Dr. Lee Pearson (Subcommittee Chair), Dr. Thaddeus Bell, Eric Bellamy, Alan Hughes, Thornton Kirby, Dr. Jeffrey Korte, Patricia Moore-Pastides, Connie Munn, Brenda Murphy, Juana Slade, Richele Taylor, Gwen Thompson, Dr. Brannon Traxler, Kim Wilkerson, Lathran Woodard, Lillian Mood.

#### **Not in attendance:**

Dr. Graham Adams, Bishop Samuel Green Jr.

Also in attendance were Bernie Hawkins, Facilitator (SHaPE SC), Cassandra Harris, Director of Strategy and Engagement (DHEC), Marshall Taylor, General Counsel (DHEC), John Harleston, Chief Counsel for Administration (DHEC), Camillia Leacock, Director, Office of Operational Excellence (DHEC), Lawra Boyce, Senior Consultant, Office of Operational Excellence (DHEC), Jessica Cornish, Senior Consultant, Office of Operational Excellence (DHEC), Les Shelton, CQI Coordinator, Office of Operational Excellence (DHEC), and members of the public attending virtually.

#### **Item 1: Call to Order/Welcome**

Chairman Dr. Lee Pearson called the meeting to order and welcomed members and attendees to the first subcommittee meeting.

#### **Item 2: Review Goals of Subcommittee**

Bernie Hawkins stated that the mission of this subcommittee is to evaluate the provision of public health services in this state with the goal of developing consensus-driven recommendations. These should be data-driven and considered best practices. He noted that the task force and its subcommittees are considered public bodies, so the members should read and adhere to the FOIA tip sheet for public meetings, which will be made available online.

### **Item 3: Overview of Current Public Health Services in South Carolina**

Dr. Brannon Traxler, Director of Public Health for DHEC, provided an overview of the current status of public health services in this state, highlighting the diverse activities performed both routinely and in emergent situations and how they interact with other areas of the agency in those instances.

Dr. Pearson had several questions/comments in response: **(1)** access to the PHAB accreditation documentation would be useful; **(2)** since DHEC is one of few states with combined health and environmental functions it might be helpful to see how our frameworks compare; **(3)** he would like to see their org charts; and **(4)** the number of Public Health employees that our stated funded vs. those that are grant funded. Dr. Traxler and Cassandra Harris agreed to provide this information.

Lathran Woodard asked what services DHEC is required to perform by statute. Ms. Harris stated that this is listed in the Agency's Annual Accountability Report, which will be made available to the members.

Thornton Kirby requested a definition of "outbreak" which Dr. Traxler explained was contingent upon the pathogen involved.

Lillian Mood noted that epidemiology is the core of DHEC functions, and that the environment is a critical determinant of health, so there are linkages between them but the decisionmakers do not have a disease control background.

### **Item 4: Overview of Current Health Care Quality Services in South Carolina**

Gwen Thompson, Director of Healthcare Quality at DHEC, provided a synopsis of the current healthcare quality services in place, emphasizing their name change from "Health Regulation" because their focus is more than just regulating facilities. They are partnering with provider groups to provide assistance to allow the facilities to succeed and provide quality care. She also noted the interactions they have with the environmental side of the agency as part of their work.

### **Item 5: Subcommittee Input Process and Next Steps**

Mr. Hawkins explained that they are evaluating the current state of how healthcare and environmental services are being performed and how they can be improved in the future. They will receive input from customers, stakeholders, and subject matter experts. The three subcommittee reports will be harmonized into final recommendations to be provided to the DHEC Board, the General Assembly, and the Governor.

Mr. Hawkins reviewed the Subcommittee Input template with the members, noting that the questions had become more specific based on discussions from the first full task force meeting. But it is a tool for guidance, not an absolute requirement to be followed in order to reach consensus.

Dr. Pearson and Mr. Hawkins noted that due to the magnitude of information sought, the initial draft timeline had been revised, allowing extra time for subcommittee discussions.

Mr. Hawkins noted that the Environmental Subcommittee had determined that they needed to have a meeting in person to help develop their recommendations. Dr. Pearson felt that an additional subcommittee meeting prior to July 4, 2021 would be helpful to allow an opportunity for the members to review the status

before the planned subcommittee meeting at the end of July. He will work with Jessica Cornish to schedule it; however, it was not explicitly stated that this meeting will be in person.

#### **Item 6: Other Items and Suggestions**

When asked, Ms. Harris identified the PHAB application, agency organization, the 2017 Legislative Oversight Committee Report, the State Health Improvement Plan (SHIP), and the State Health Assessment (SHA) as source documents for the subcommittee members to review.

Lillian Mood expressed concern that they could expend a huge amount of effort to generate a document that no one was going to look at because of preconceived notions of what the solution was. The focus of the study should be narrowed to what is not working well and how do we fix it.

Lathran Woodard requested more information about the Behavioral Health subcommittee which Mr. Hawkins provided. Patricia Moore-Pastides noted that there had been prior discussions about the interactions between health and environment, but they needed to also consider how public health and behavioral health interact (such as county health department staff dealing with behavioral clients). She requested a presentation of how DHEC, DMH, and DAODAS interact.

Dr. Pearson noted that the discussions seemed to focus more on the DHEC central office perspective. Given the agency's four regions he requested a presentation from their perspective of what challenges they face and what is/is not working for them. Ms. Harris and Dr. Traxler will get someone from a region to provide that input.

Thornton Kirby stated that given the number of behavioral health clients treated in hospital emergency rooms he felt that there should not be artificial silos between the Health Subcommittee and the Behavioral Health Subcommittee and requested a crosswalk between the two. Juana Slade agreed, noting that she has been a party to some form of this conversation for years. Mr. Hawkins agreed to arrange a joint dialog between the two subcommittees.

Dr. Pearson reminded the members that Ms. Harris would be posting the requested documentation to the SHaPE website as well as sending it directly to them.

Being no further business, Subcommittee Chair Dr. Pearson adjourned the meeting at 4:57 pm.

The members will be notified when the next Health Subcommittee meeting has been scheduled.

Recordings of Task Force and Subcommittee meetings can be found at [scdhec.gov/shapesc](http://scdhec.gov/shapesc).



Dr. Lee Pearson, Health Subcommittee Chair  
June 23, 2021