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Legislature USVI

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I'm going to ask it again and then I'm going to thank you for your time for the tax, thank Mr. Chair for the leeway but I've asked this question before and I don't know if that question is for yourself or for Mr. Lairdham but it's it's very important for me to understand exactly what the office of the tax collector in particular and of course the office of the lieutenant governor overall is really doing to ensure that we are able to ramp up our collections. particularly in the current year meaning you know we just have to figure out what that plan is to stop the deltas to stop the bleeding so what is that plan to really get us to a place where we are seeing we are able to come before the legislature and say you know what what are the KPIs we're looking at to say you know we are moving to get to 80 percent to 90 percent what's that plan in the in the in the year that's in front of us okay thank you mr. chair for the time I'll listen on your time the tax collector would be in a better position because he has our various plans to get us there thank you senator Brent Laird I'm tax collector we are having a multi-pronged approach towards collecting the delinquencies and so one of the key things that the chief of staff mentioned is going to happen in the next couple of weeks is going to be that delinquency publication and oftentimes historically we've shown that once people see and understand that their names are published in the papers and that we're about to take the next moves that generates uh persons to come in and and and and pay on their delinquencies whether by payment

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plan or by applying payments in reference to not even going back with outstanding property tax owed, what is the plan as to how you're going to collect the \$70 million that is owed this fiscal year? Senator, let me just make it clear, if you would allow me, sir. Sure. The \$70 million is what we would, if you just put all the taxes out there, no credits and no other things, that's what we would collect. But because the credits add up to around \$20 million, that brings it down by \$20 million. That was my question. The question was the 86,000 bills that are sent out, what does that total, and that is with the homestead and with veterans and everything, what does that 86,000 bills, what is the projected total if you collect those 86,000 parcel bill that was sent out?

- 0:02:55 Total of that would be around 50, 50, about \$55 million. Then, because the 53 million, Mr. Lairdum, how much of that projection includes parcel among some previous year? For the \$53 million, Senator, \$20 million represents delinquencies and \$33 million represents current year taxes. So you're saying that the \$86,000, and this is a cumulative amount that you guys have run, the \$86,000 bills represent some \$50-something million due every year after all exemption comes down to \$50-something million?
- 0:03:43 Yes, sir. And we're collecting about 30 million of that. Yes, sir. So we're collecting, like 60%? Yes, sir. So the question is, how do you collect that additional 40% for the present fiscal year? How is it moving? Suppose 60 was the average every fiscal year that we're collecting. How do we move from 60 to 65 or 70 the next fiscal year and then still be going after the back taxes?
- 0:04:18 Senator. Thank you, Senator. In the first year of bills, once bills are run, we typically have, I would say, about more than 50% collected within that first year. The majority of that is collected in the months between June and September. Right. That's why I said about 60%.
- 0:04:47 But I think what I was looking to hear, let me just put it on there. There's a tremendous issue in reference to probate. Properties that exist among multiple family members and nobody paying the property tax. So the property have just sat there for a number of years and no one is paying the property tax. And that particular, I'll use the word delta that I last used, exists every single year. So what is the plan as to how we're going to be able to deal with all of these literally abandoned properties or properties that are in probate? nobody is actually taking responsibility what is the plan that we're going to be able to the outstanding taxes of those properties or get those properties back into circulation I mean nobody wants to hear about actions but you can't have a property that's within a family and there's 15 years of outstanding property taxes and it's just allowed to remain that way And I think that is why we see so many abandoned homes on St. Christ and Thomas, I know St. Christ and Thomas for sure, that just exists and which can add to the, to, to, to, um.
- 0:06:08 Let me start by saying, Senator, um, the amnesties they bring in, um. Yeah, well this isn't, this isn't amnesty. This is ten families on it, everybody arguing who is going to be the owner, nobody paying the taxes. Well, when we move forward with, and we've started to move forward, especially with the older properties, with the notices, that is a process set by statute where we're going to get to the auctions. Okay. And like you stated earlier, Senator, the auction process, it is actually the auction process or leading, the process leading up to auctions that really bring in a lot of the monies, the delinquent monies, as soon as people realize that their properties are going to be sold.
- 0:06:56 I think, for instance, in 2017, we started out with a large number, Attorney McLean could give the, maybe more of an exact number of properties that were to be sold in the auction process. And by the time we got to the end of that, people had already run in and either paid or entered into payment plans to pay, and there were only like none, I believe, on St. Thomas, there were a couple, maybe two or three on the island of St. Croix. So the whole process leading up to the auctions brings in a lot of the monies, and that's what we're moving forward with. Thank you. Point of inquiry, Senator. Who was it?
- 0:07:43 Good afternoon. When I asked the question earlier in regards to the percentage as it relates to probate versus the collections, because that's important to me because we know there's a large issue at times dealing with the judicial system. Not every aspect of property taxes has to do with family members not wanting to pay. Some of it is because some of these things are stuck in our judicial system for years. Are those property going to be susceptible to potentially going through the auction process as well?
- 0:08:21 Okay, Attorney McLean, I'm going to let you speak to that, please, as regards to the process. Yes, ma'am. um no when properties are in probate just for the record we like properties that are in probate because probate you go to the court and the court gives an order of administration to a person or an institution but there is a person who is responsible for this property that is now part of the estate of the decedent so we like having a name because then we know who to send the bill to we know who to contact if something goes awry so we like probate secondly with respect to probate we do not sell those properties because normally it's a little you need permission from the court it's just different it's a court order proceeding so we're not going to sell it it's just us a little more challenging but we do have someone responsible for the taxes. I don't know if that helps to clarify things a little.
- 0:09:31 DIRECTOR DEWOLF- Thank you for your response. SPEAKER 1st of inquiry Mr. Chairman and I want to go to page 44 these are your performance indicators. Specifically I'm looking at your key performance indicator for the collection of property tax. You have a target of 100%, but as of, that's your target, as of June 30th, 2021, you have only been a little over a quarter of that, 27% you're meeting your target. Again, it goes back to the question relative to how, I know you have a new system with a tax collection, But how is this system going to make us be able to collect tax more efficiently and quickly? That's my concern. I want to also just commend because if you're in a grading system and you're a teacher,

that's a flat-out F.

0:10:39 You're not even meeting your own indicator that you set as a target. You have the corporations and trademarks. They're meaning they're almost there to meet in their targets with their key performance indicators. Senator, let them answer the first one first because you hit with the property, the performance. Yes. So if you can answer that because it's there, so let them answer the question. In reference to the property, Mr. Laird, the key performance indicators are the target that you have. Yes. Thank you, Senator. Brent Laird, I'm tax collector. So the key performance indicators are indicative of our goals.

0:11:20 And so we have cycles within the revenue collection for property taxes. And right now we are in a cycle coming towards the end of the fiscal year, which is a high point. This is where people oftentimes come and pay before the new bill becomes delinquent. Let me just be specific. Your key performance to increase the year-over-year delinquency tax selection by 5% annually. You're saying that you believe you're going to meet that target?

0:11:52 Yes, Senator. Okay, because of the billing cycle, you're going to meet that target. Okay, to increase the number of installment payments. One minute. To increase the number of installment payment agreements issued by 5% annually, your target was 100 and you were at 27. Are you going to meet that target? we believe we will senator in the last in the last few months you're going to increase by 75 percent let's be realistic the the this installment payment coming in and applying for installment payment agreements have really come in within the past month as i said because is cyclical once the bills become due and more so also buttressed by if we when we do the delinquency publication that's what drives people in to do the installment payment agreements and so yes senator we do believe that as people realize that this is the way to stay off of the So for those outstanding property tax bills, we're sending out letters to them and asking them to come in and go into an installment plan, we're sending out some type of written correspondence and telling them that they can come in and set up an installment plan?

0:13:16 Yes, Senator. The first notification is on the subsequent bills. No, no, no. I'm not talking about the subsequent bill. I'm talking about documentation that is going to a landowner. Please be aware that you owe property taxes from 2004 to 2012 in the amount of blam blam. You are allowed to come into the office and set up an installment plan. Are we writing specific correspondence to them?

0:13:49 Yes Senator we have a process of notification for all parcel owners wants to become delinquent. That wasn't the question though. Yes we are sending notifications to customers that are delinquent in addition to the subsequent bills which list the delinquencies. I know that um you spoke about sending out uh information to the public with regards to individuals that are owed property taxes for years and I am all for that.

0:14:45 However, I think when we ask questions it needs to be answered so we could be clear on what's being asked answered. The question is what is the process that that you're utilizing to inform property owners who have outstanding property taxes outside of the information that's sent on the annual bill. Is there a process outside of that? That's the question. And what is that process if there is a process? And if there's no process, please don't take me down the road.

0:15:31 Just saying you're no process. Senator Claudette Farrington, Mr. Latham can speak to the process. I recall when he came on board, the plan was, like you said, besides sending out the regular tax bill, we had a plan in place. Is it being done? You know, what I'm saying is we had a plan in place to push out delinquency notices, You send out a cyclical, you send out a first notice, you send out a second, you send out a third over a period of time. That's my question. I recall that. Claudette, you're my friend. I'm sorry. I recall that. I mean, Ms. Farrington, I'm sorry. Yes, yes, okay.

0:16:10 The question is, but it's okay. It's okay that that was, that's what you, no, allow me. Okay, go ahead, Senator. It's my point of inquiry. And, you know, every time I ask this question, I ask it from the last, my first term, and I'm asking it again, and I continue to get the run around, and I'm really getting frustrated, okay? The plan is fine. The only thing I want to know, is it implemented? Yes or no? Okay, Mr. Let up and speak to that. No, no, no. Please, please. Is the plan implemented? Is it a yes or is it a no?

0:16:45 And if it's a no, the question is, when will it be implemented? It's a simple, come on. You can't keep doing this. One minute. One minute. We're going to give you two minutes to come up with an answer. The committee is at recess for two minutes. Okay. Thank you. Sorry. I'm reaching people. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. The Committee of Finance is back on the record. Mr. Lader, have you started the process of sending out first notice, second notice?

0:25:04 Attorney, come on. Senator Fred Gregory's question, the short answer, no. Okay. We have been operating on a short staff in the office, one employee on the island of St. Thomas. We have, what, three on St. Croix, but one on St. Thomas. So there have been challenges, but we will be, we are interviewing people. We have interviews scheduled to bring on

persons. We have a list compiled to assist with that project, and we want to ensure, we want to tell the people of the Virgin Islands that your property will not be taken, cannot be taken through the auction process without us following the statutory requirements of notifying them individually of their delinquent taxes.

0:26:01 How many, coming to you right now, Senator, how many vacancies you have in that office? Currently, you're saying? Yes. Or projected, I'm seeing you have real property, what is it, REC is what, record, officer? Where are you, Senator? Page 12 of 16. The real property tax, 12 of 16. No, you have two real property tax collectors. Mm-hmm. Right.

0:26:27 At entry level pay, that's a unionized position. Yes, those are unionized positions, Senator. Okay, and then you have real property, what's the REC, record? What is it? That's in Ricardo. We have real property record officers that are in Ricardo deeds as well as the office of the tax assessor. Okay. And we have real property tax collectors in the office of the tax collector. So which of these positions is going to help to expedite sending out the first notice, second notice? the real property tax collector? Real property tax collector. Yes, Senator. And how many total positions you plan to try to staff up that office with?

0:27:14 Excuse me, could you repeat the question? How many additional positions you are trying to hire for the office so that we can have all the processes expedited? For right now, Senator Claudia Farrington, to start, we anticipate having, give me a minute, But we anticipate having a tax collector, a chief enforcement officer, and three staff for St. Thomas, St. John, and in the St. Croix district, a chief enforcement, and three. So that would be, what, six and seven to start. How much do you need?

0:27:48 How much do we need? And you can answer that after. tell me how much do you need over the additional monies that you that i'm projecting you're going to collect more revenue than what we have here in the we need all of our monies in general fund and all other local funds every cent and i'm saying yes i'm i'm saying yes yes okay yes i'm serious because wait one minute okay i'm saying that there appears to be some additional funds that will be collected through the financial services those monies could be utilized for anything and out of the government correct the statute doesn't doesn't specify that it has to stick to that i will have to check that with council by i don't think i don't think so but the point is when it comes to financial services fund again we're working on contract commandments we're working on yeah but i'm saying if there's anything extra you have we carried over three million we projected we'll collect our next six if there's any carryover i mean eventually you might have to come on the the general fund but if there's any carryover you have eight hundred and fifty two thousand dollars you're projecting in personnel and 376 in in fringe i'm just saying is there a possibility that you could increase the personnel and increase their friends so we could bring more individuals on?

0:29:18 You have increased the other services on charge by \$2 million. We could. We could. We could take a look at that. Okay, thank you. So we're on the same page, finally. Oh, finally. We could take a look at that. If you have a mortgage, your property tax is escrow, correct? Okay, it comes through then.

0:29:46 Have you guys reconciled the payments on the banks for property tax? The day escrow is sort of about every single month. Have you been able to reconcile all existing mortgages that have escrow accounts for property tax and those have been paid by the bank on behalf of a property owner. Have those amongst men credited towards that particular property? Senator, if I can explain the process, what we do because persons pay out their mortgages during the year and because persons are added to the list during the year, when we are about to bill, we send the latest list, the prior list, to the banks, asking them to update that list for us so that we'll know who all should be billed through their institution. So they have an opportunity to bring on the additions for which they are collecting monies, including taxes, and then they have the opportunity to also delete persons who previously paid. Are we up to date with the process? Is that process done timely that we're up to date with that particular process that the monies that the banks are paying, accredited towards that particular property? Senator, I would say yes. It happens every single year.

0:31:16 You say yes. Okay. Now, I'm still getting a lot of tax that tech, I'm still getting a lot of inquiries into, and this is on a real estate market, that the tax clearance letter is really taking a longer than usual period of time that before it was a three to four-day window, and now it is weeks. So if we could really look at that because they're saying that some transactions are falling through because it's taken so long for it to be processed that we're losing money in that particular market. So just one of the areas that we need to seriously look at and make sure that we're able to improve.

0:32:00 We will. Okay. Senator Saru, I've been waiting forever. I'm going to do Senator Francis Heiliger. Then I'm going to go to Senator Saru and then come back. Okay, Senator Francis Heiliger. I have been sitting here for a very long time listening to the testifiers. And one of the things that have really been a cry on my side has to do with the rules and regulations being followed in regards to before you get to the point of publishing someone's name in the papers one of the things in regards to those rules and our law is specific as to what myself and colleagues have been talking about i know for a fact these notices have not been going out because even with your own testimony and one of the gentlemen here you guys

were very adamant about sending out your publication with people's list but you never reference doing the notices and that's something you guys have not been doing for a very long time and the problem with that is unless somebody sues this government because you cannot have laws on the books where you circumvent the whole process and jump straight to the part about publication and then that causes a major issue because then people could come and sue this government for you guys not following the process if you did 20,000 of them you guys are responsible to prove that you sent out 20,000 letters but this is not happening and it's a major problem for me as a representative of the people when you are here all giddy about publication in the newspaper but then you're telling me you've never even gone to the process to make sure that these notices were being sent out and this is not just for this year this has been for several years

0:33:50 because i personally have to help individuals challenge these situations with the lieutenant governor's office so i'm only asking last statement i'm only asking that you guys please follow the procedure because it's a safe haven for the government as well as protecting the people of this territory to retain their property if they need to thank you if i may clarify i think that you we did ask that you said before you send out any notice to the newspapers you will make sure that you send out the first and a second notice to follow all of the guidelines to make sure that the protections that exist for people and property will continue what what i also stated is that the publication that we're working on is for older properties.

0:34:39 I believe prior to 2015, I think it also came out here that in 2017 we had a successful auction. So prior to that auction, the processes were followed leading up to that auction. And that is why the publication is going to only include properties properties that have been delinquent for a longer period of time to ensure that those that become delinquent since we're not individually notified will be notified and we will be following the law. Thank you. Okay. Thank you so much. Senator Saru?

0:35:26 My mic is stuck. Do you have some issues over there? I'm back. I heard that you're up standing and pulling stuff. Yes, my mic was stuck. Morning, morning, afternoon to all. Director Brady, where do you think you're going? Where do you think you're going? Where do you think you're going? There's nothing home for you, Director Breedy.

0:36:12 Okay. Sad to see you go, but thank you for your service. So let's go to a lot of things we discussed and make my list of questions continue to expand. Let's look at Atoni McLean. Morning, afternoon, non-judicial foreclosure. You're on mute. What are your thoughts on non-judicial foreclosure? Would it be a help to the Office of the Lieutenant Governor? Yes, because it will be another tool in the arsenal. And just for the record, I just want to clarify that legally, the statute allows for the first step in the auction process to be the delinquency notice in the newspaper that that is the actual law however the lieutenant governor's office we recognize that given the number of delinquencies it might be fairer to put in more advanced notice and that is how the first second and third notice options came up the process that will be implemented.

0:37:23 So you're answering a question from the previous testifier, so I think I need to reclaim. But I'm tying it back to you. Okay, so let's get back to me now. But good point, but Michael, I need to go from zero. Correct. So it will help because now rather than Lieutenant Governor, there'll be another level of notice. And it'll be a notice through the court. So not only do you have the newspaper, not only do you have that is specified in the law but you will also have the three notices that we as the lieutenant governor's office has um that we have implemented and then you have this other notice that we have to give through the court process so yes it adds to what we're doing perfect let's go to i look at your personal list and um chief of staff carbon cadastral how many people in cadastral is this correct could you repeat the question national division how many what's the staffing in cadastral the staffing in cadastral in st thomas i'm counting two two st thomas uh two two on st thomas how we have uh three three on st koi is that sufficient no we're in the process of moving forward with hiring in the um vacancies that were recently re-entered into the okay well how long is that what's what's in the process when can we see people from cadastral is a weakness you know that right i i you can i am it's okay to admit our weakness so we could have areas of improvement so when when do you expect to hire those in cadastral are you looking at the october one budget or do you have funds now to hire somebody people folks in cadastral we have positions in in the current budget for 2021. So what's the delay? Have we been advertising the vacancies?

0:39:21 Good afternoon, Senator Claudette Farrington. We do have a position that Mr. Mills is getting ready to conduct interviews. Talk into the mic. I don't know if your mic is on. He's, oh, I don't know. Go ahead. Can you hear me? He's getting ready to conduct interviews later this month, I guess next week. I don't think your mic is on for media. Yeah, I can hear you inside of the public. Yeah, Amelia, can you check the sounds of mic, please? Hello?

0:39:49 Good afternoon. Okay, to respond to your question, we do have a position that Mr. Mills is getting ready to conduct interviews for later this month, so I guess that would be next week. Yes. So why are we filling the Kardashian vacancy in the fourth quarter? well senator um it's it's been a long process like i said we had vacancies that were deleted to get back some of these positions to use critical higher funds um so it's when when the funding became available so let's talk about your appraisals and do you have you know people No, Senator.

- 0:40:33 How many more do you need? Senator, I think we can do well with another three just for between St. Thomas and St. John. Okay, so because I'm looking at. That's the area we have some at least one retiree. Okay, and I'm looking at page 44 of your KPIs and we have a lot of properties that have been fixed, refurbished, whatever. You gave a number of 70 million, 50. Let's talk about your appraisal of homes that have been repaired since the storms. You have homes from Hurricane Maryland that you have not appraised, Director Mills. Senator, I do suspect with the limited staff that we have and even when i drive around i sometimes look on the building permit list that we get from dpnr and i figure that based on what i see there's a lot of activity in one area that i don't see building permits coming up for and so i do suspect that that is happening so we have a loss Loss of revenue in that area, correct?
- 0:41:47 Yes. Have you projected what a loss of revenue is? To the government of the Virgin Islands? I hope the chair is listening to this conversation. Go ahead. Senator, I think sometimes it's difficult to just estimate because of the... So what's the fallout between you? Is it a permit? The permitting process? Say that again.
- 0:42:14 The teacher had just come out. I'm sorry, Senator. What is the loss in revenue in that area, right? What is the follow? What's happening there? Between not appraising properties that have been fixed or construction happening and you haven't seen a permit when you go on the Internet in your system and we're losing revenue there. Two minutes. What's that process? What's the follow? just lack of adequate billing because the assessment has to come before the billing and so if you have no not enough staff to do the assessment then it leads to not enough billing because the assessment could have been higher than it actually is financial team have you been able to quantify what that look like looks like uh senator i've said it to both the uh financial team is not the same as quantifying the last in revenue because this is budget so i sticking with numbers today what what is the loss of have you been able to to do any assessment and i hope the chief of staff writing is not something to do go ahead so there's not been assessment uh we have not done it at that level no senator we need to we need to get an assessment on that that should be a priority because we have things getting knocked up here and knocked up there things being fixed and we are not we're not collecting the government isn't collecting their due share and then we sit and say we don't have any money but if we're able to fund three four positions that you need the return of investment far exceeds the cost to fund the position. Do you agree?
- 0:44:05 Yes, Senator, because I always say that if we get \$200,000 worth of positions, we can multiply that. I can guarantee that we can multiply that. So your areas of need are cadastral and appraisals, right? Yes, Senator. And we also, Senator, expect a return on investment for the new comma system that was put in place, the new appraisal system that was put in place. Perfect. Let's go to sewage fees. Have you made any dent on that? No? No, we· No, Senator. We are about to just explore a cooperative agreement.
- 0:44:55 Hopefully that will get somebody's attention, that there's a commitment to provide us information every year because we need to do that. As you say, houses building, houses expanding, and the SOFI, I don't think people ever connect the SOFI with the keeping of this Virgin Islands as a tourist destination. Well, here's a problem, and I get a little confused or stressed because you all belong to the same branch of government. You're in harmony, not harmony. You're in harmony right now, right?
- 0:45:32 So we have one division saying one thing, the other saying something else, and we're losing revenue between this appraisal process, the sewage fee, and you're on a financial team, So what are those discussions within that particular area? Well, somebody have to say, get it done. Senator, we have begun, we have reached out to them, but we can't, there's only so much we can go into somebody's place and do.
- 0:46:04 And somebody's place is mismanagement. Yes, and we have reached out to them. We have offered assistance by the GIS. We have offered assistance in any way they want us to so that we can raise the level of sewer fees that are due and payable to this government. What is the loss on sewage fees? Have you been able to quantify that amount? No, Senator. Until we do a reval, if we did a reval, we'd be able to do much of that and be able to tell you exactly, because at that point, we're not only identifying them, we then will be able to add them to the roles.
- 0:46:55 Let me go back to the Chief for Staff. Chief for Staff, do you realize the areas that we're losing major revenue in? you realize the areas that we highlighted just now where we're talking about major loss of revenue and we're not able to quantify those losses because if we're talking budget we're a revenue generating entity we should be able to say listen on the appraisal side not enough people assessment of properties blah blah blah the government is losing 35 million a year in this area and sewage fees we're losing this amount of money in this area our corrective measures moving forward or blah blah blah these are the things i expect to to hear um yes senator and we will as as you've noted um mr mills is on the financial team and we we have been reaching out to waste management we have to get beyond the discussions and reaching out and we recognize that we are just the conduit for the money the chair of the waste management board is the assistant commissioner of an executive branch in his government um let's quickly um there's a legal publications revolving do i didn't see it i know that was a legal publication do you have anything in that account title 3bic chapter 34

there's a revolving fund for that that's no money in that account right time it's called illegal publications revolving fund title three chapter 34 because people who's that oh and last last question thank you everybody had 40 points last one um director brady yes senator um the captive insurance

0:48:50 captive insurance falls on a banking and insurance what are your thoughts on um you know the captives right now are located like in bermuda cayman islands i believe that if we revisit the whole captive discussion i think it could generate revenue um for the territory i know there was a I think a repatriation tax was waived under President Bush. What are your thoughts on the whole captive insurance concept and reviving that and moving that? Thank you for the question, Senator. Gwen Brady, Director of Banking and Insurance.

0:49:24 We have one staff person who is assigned a responsibility with captives, and we are aggressively pursuing it. The only problem now is that nearly every state has a captive insurance program. And so it's no longer is it just like the Cayman Islands and mostly in the Caribbean. The states were seeing where many of their businesses were relocating too much of their operations to the Caribbean. And so now what they've done is they are setting up captive programs to the point where NAIC is now looking at captive insurance, the whole captive insurance business, and how it can be revamped. But we are aggressively pursuing it. We have many branch captives, not necessarily the headquarters of a captive operation, but we are researching that. Okay. Thank you for the latitude, Mr. Chair. thank you senator saru mr point of inquiry senator francis are we gonna be wrapping up now senator so this is gonna be the last so we have a large entity coming before us after department of health so point of inquiry go ahead senator joseph sir mr chairman thank you so much for the time i want to know um are you looking at automating in any way the tax clearance process similarly that you have done for and it looks good based on the performance indicators for the corporations and trademarks relative to the turnaround time as well as for the recorder of deeds you seem to have a really fully functional automative system and tax clearances bringing money that's a conduit for us to bring in some money so are you are you looking at automating that whole process

0:51:29 and now Mr. Lairdum tax collector Brent Lairdum tax collector yes senator we have in our plans to automate that process it probably wouldn't happen until in the next fiscal year When a property is assessed, when you spoke about the sewer fees, is it assessed in regards to making sure, because I know some properties have their own septic system, is there a difference with it being put on their bill in regards to that?

0:52:04 No, you're asking if, let me just restate it to make sure I understand. If a property is not connected to the sewer system, are they charged? Yes. The answer is not initially, but eventually when they remove it, a truck takes it, puts It's in our waste management facility, and they're charged for that service at that time.

0:52:46 Otherwise, if you're directly connected to sewer lines, or if you come within a certain number of yards of the sewer line, you pay the sewer fee. So basically, the question is, so it's not going to be on their bill, but they're charged if they utilize the service. ...opportunity to reduce the taxes based on damages. Yes. So now you need to reassess to find out whether or not those properties... ..have been improved. Yes. So do we need, for a short window of time, to bring in a company that would be able to assess all of those companies, all of those properties that are in taxes because of damage and have now been repaired?

0:53:26 We can explore that. We can look at that and determine if that will help us to propel forward with regards to the appraisals, looking at any additional monies we have in the fund. If we are going to spend \$150,000 to bring in a company, but it's going to realize us with a million dollars, then we're not · the government is going to be generating more than we're spending. Understood.

0:53:55 So we need to make, there must be a process in place, you know, a person whose house wasn't damaged and paying the fair amount and then somebody receive an insurance settlement, the property is now worth way more, but they're paying way less is not fair. So we need to equalize, and we need to come up with a quick fix, and then a long-term fix. The long-term fix is hiring individuals in the position, but they're going to need the training, et cetera. But the short-term fix would be to have a company that would come in. We look at all of the properties that receive that reduction. at all of the properties that went to DPNR for improvement, and we assigned a task to the particular company if you can provide us with what the cost would be because that is going to generate additional revenues for the government. And then we need to look at a fixed. We also have a lot of the two areas where we get the most is this tax-larious and cadastral. The process for cadastral, sometimes convoluted, very suspicious at times in terms of your ability to navigate a particular office. I'm saying a lot without saying a lot.

0:55:15 So we need to look at what is going on in there because I think that is also an area that we need to improve. But I'm going to allow you and thank you for your testimony, Officer Lieutenant Governor, for the work that you have done. We have seen tremendous growth in certain areas. cooperation, trademarks, all of those we're seeing growth. We now just need to

work on those other areas that are major revenue generators as to how we're going to get it fixed. Yes, thank you, Senator.

- 0:55:45 So we're done for this one, Senator. We'll go on to the next one. We have one. So closing statement. Closing statement is simply that we thank you for the opportunity for the office of Lieutenant Governor to budget testimony in support of our fiscal year 2022 budget and okay well we thank you for the opportunity to allow us to provide forward to receiving our funding so that we can continue to provide our needed the needed services that we provide and to continue to collect revenues for the government and we thank you so much for your testimony and definitely at a time certain we will be following up with your real property office to see what we need to do to be able to make it fully functional to include staff and etc so we're going to follow up so that we can have a discussion about those procedures that you're putting putting in place and start and date and automation and everything else that would allow this government to collect more monies so we want to thank you for appearing before us and this committee will We'll sign a recess for five minutes.
- 0:57:32 Thank you. Thank you.
- 0:58:32 Thank you. We'll be right back. [2 such phrases repeated 14 times · standby audio before the proceeding, transcribed by the recogniser as speech]
- 1:05:32 We'll be right back. We'll be right back. Thank you. Thank you. You Thank you. We'll be right back. Thank you.
- 1:09:32 We'll be right back. Thank you.
- 1:10:32 We'll be right back. Thank you. Thank you.
- 1:12:02 We'll be right back. Thank you. Thank you. We'll be right back. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Thank you. Oh, my God. so Thank you. Thank you. Thank you. Thank you. Thank you. Thank you.
- 1:22:32 Thank you. Thank you.
- 1:23:32 Thank you. We'll be right back. [2 such phrases repeated 13 times · standby audio before the proceeding, transcribed by the recogniser as speech]
- 1:30:02 Thank you. Committee of Finance is out of recess. Madam Clerk, can you read the next item in the agenda? The Virgin Islands Department of Health and the Virgin Islands Board of Nurse Licensure invited testifiers, Justa Encarnacion, Commissioner, Virgin Islands Department of Health, Carmen Vanterpool Romney, Territorial Executive Director, Virgin Islands Board of Nurse Licensure. thank you madam clerk commission i'm going to allow you to put your name and title on the record along with the members of your staff who are here in the well and those who are participating virtually and then we allow the members of the board of nurse licensure to put their name and title on the record so beginning with you commissioner thank you senator i am Justa Orteeta Encarnacion, Commissioner Ferdinand's Department of Health.
- 1:31:27 Thank you so much. Next. Good afternoon, Senator. My name is Joan Gia-Baptiste. I'm the Deputy Commissioner over Human Resources and Labor Relations at the Department of Health. Thank you. Good afternoon. My name is Tatea Monell-Hewitt, Chief Financial Officer. Okay, next we'll go to those participating virtually, beginning with Assistant Commissioner, Dr. Sims. Hi good afternoon Dr. Nicole Pragwell-Simms Assistant Commissioner Department of Health Department of Health Department of Health Department.
- 1:31:59 I'll just go down as I'm seeing them Mr. Callender. Good afternoon. Good afternoon Director for the Division of Behavioral Health, Alcoholism and Drug Dependency Services. We are not hearing you well if you're in the room alone. would ask that you take off the mask if you're alone. If not get closer to the device. I can say your name again sir. Good afternoon Curtis Callender acting director for the division of behavioral health alcoholism and drug dependency services.
- 1:32:44 Thank you Ms. Penn. SPEAKER 4th person for Virgin Islands Board of Nurse Licensure. Thank you. SPEAKER 5. SPEAKER 5. SPEAKER 5. Good afternoon. Carmen Van Tupuul Romney Territorial Executive Director Virgin Islands. to a. SPEAKER 5. Good afternoon. Arnel Louis. Board of Nurse Licensure Treasurer. DEBORAH RICHARDSON-PETER Good afternoon Deborah Richardson-PETER Director for Professional Licensure and Health Planning.
- 1:33:32 DEBORAH RICHARDSON-CESTEEL Good afternoon. Bernard Steele Deputy Commissioner of Public Health. DEBORAH RICHARDSON-CESTEEL Good afternoon. Good afternoon Ruben Malloy Deputy Commissioner for Preparedness Facilities H.I.T. Recovery. DIRECTOR DEWOLF- Ms. Walman. DIRECTOR DEWOLF- Ms. Walman Deputy Commissioner Health Promotion and Disease Prevention.
- 1:34:10 DIRECTOR DEWOLF- Dr. Hunt. ELLIE WILSON- Good afternoon Dr. Ty Hunt-Cesar Medical Director Department of Health. DIRECTOR DEWOLF- Thank you I'm seeing Dr. Ellis. ELLIE WILSON- Hi good afternoon Dr. Esther Ellis

Territorial Epidemiologist Department of Health. DIRECTOR DEWOLF- Ms. Samuel.

- 1:34:37 ELLIE WILSON- Good afternoon Beverly Stephen Samuel Departmental Budget Control Officer at the Department of Health. SPEAKER 3rd 1st 00 Good afternoon. Beverly Herman actually Wallace. Human Resources Director Department of Health. SPEAKER 3rd 2nd 00 Good afternoon. Angela Henry Financial Services Director at Department of Health.
- 1:35:09 SPEAKER 4th 2nd 00 Good afternoon. ELLIE WILSON- Good afternoon Dr. Charmaine Myers the Maternal Child Health Director. DIRECTOR DEWOLF- Ms. Hawley. Darius Hawley. Darius Hawley Chief Procurement Officer Department of Health. DIRECTOR DEWOLF- Ms. Abao.
- 1:35:43 Go ahead. Good afternoon. Director of facilities management. Good afternoon. Eleanor Johannes here. Federal Grants Director. Dr. Esther Ellis. It's Dr. Turei. I know it's two. We'll tell us the doctors. Okay. DIRECTOR DEWOLF- Dr. Ellis Esther. DIRECTOR DEWOLF- Hi.
- 1:36:17 Good afternoon Dr. Esther Ellis Department of Health. DIRECTOR DEWOLF- Ms. Charles. DIRECTOR DEWOLF- Good afternoon. This is Brett Ellis the Territorial Lab Director. DIRECTOR DEWOLF- Thank you. Ms. Charles. DIRECTOR DEWOLF- Good afternoon Department of Health. DIRECTOR DEWOLF- Mr. Ritter. DIRECTOR DEWOLF- Mr. Ritter. DIRECTOR DEWOLF- Mr. Ritter. DIRECTOR DEWOLF- Mr. Henry. DIRECTOR DEWOLF- Good afternoon. Good afternoon Public Relations Director Janessa Ritter Mr. Henry Good afternoon Jason Henry from a couple of disease. Did I skip anyone anyone that I haven't called you can go ahead and put your name on the record please.
- 1:37:18 Good afternoon Juan Sun Harris Director of Environmental Health Services. Thank you. Anyone else. Good afternoon. Good afternoon. Kathleen Owenoway disaster recovery specialist Department of Health Project Management Office. Good afternoon. Faced Out Territorial Director Immunization Program. DIRECTOR DEWOLF- OK. DIRECTOR DEWOLF- Good afternoon. This is Dr. Marjoram. Medical Director for Family Planning and Acting Medical Director for EMS.
- 1:37:55 DIRECTOR DEWOLF- Good afternoon Patricia Sproul. Acting Director Infants and Toddlers Program. DIRECTOR RANKIN- Good afternoon Lauren Concepcion WIC Director. DIRECTOR DEWOLF- That's it Commissioner. DIRECTOR DEWOLF- Good afternoon. Good afternoon. DIRECTOR DEWOLF- Good afternoon Kevin Hodge Director of Health and Commissioned Technology Division for Department of Health. DIRECTOR DEWOLF- Good afternoon Lorraine Benjamin Matthews Territorial Director of Vital Records and Statistics Department of Health.
- 1:38:33 LYNNIA FREDERICKS. Okay, Commissioner, we're going to begin and I'll let you put your testimony on the record. Thank you, sir. Good day, Honorable Senator Kurt, AVLA, Chair of the Committee on Finance, Senate President and Vice Chair of the Committee on Finance, Donna Fred Gregory, Committee members and now other members of the 34th Legislature of the Virgin Islands of the United States and listening and viewing audience i am justa or tita incarnation commissioner of health the department of health appreciates the opportunity to appear before the finance committee today to share our fiscal year 2020-2021 accomplishments and challenges along with the goals and objectives established to satisfy the governor's recommended fiscal year 2022 budget i would like to recognize tatia monnel hewitt our chief financial officer and Joan Jabamtis, a Chief of Human Resources, who are here with me today. Due to COVID-19 restrictions, Assistant Commissioner Nicole Cragwell-Simms, other members of the executive and leadership team are engaged virtually.
- 1:39:51 I also thank all the dedicated Department of Health staff who work strong daily to improve the health and wellness of the Virgin Islands population, especially during these times. The Department of Health staff, you honestly continue to amaze me. Thank you. I would like to thank the Honorable Governor Albert Bryan Jr., the Honorable Lieutenant Governor Tregenza A. Roach, and my colleagues in the Cabinet for the support they have provided in position in the Department of Health where we can continue to improve needed services to the community.
- 1:40:25 Title 3, Title 19, and Title 27 of the Virginities Code prescribe that the Virginities Department of Health is responsible for providing public health services to the people of the Virgin Islands which involves protecting and improving the health of our people and our community through health promotion and preventative initiatives. Preventative measures are widely recognized as key components of efforts aimed at improving overall health and reducing health care costs particularly related to chronic disease. The Department of Health functions as both the state regulatory agency and territorial public health agency for the usvi the department has oversight of 26 programs or divisions all of which are operational additionally as the lead agency for emergency services function 8 or esf 8 the department also oversees hospitals during a declared emergency or disaster at present we are the lead agency during the covet 19 pandemic while successfully providing essential health services to the public. I would like to thank all our partners, federal and local, who have

collaborated so effectively to respond to the COVID-19 pandemic. Today we will highlight key overarching accomplishments during fiscal year 2021, to date provide an overview of the fiscal year 2021-22 agency budget program and accomplishments, some key challenges and outlined agency goals and objectives for fiscal year 2021-22 guided by the strategic plan and key performance indicators. During fiscal year 2020-2021, the Department of Health continued its engagement with the Association of State and Territory Health Officials or ASTHO and its evaluation of our health planning process.

- 1:42:22 When we came before you last year, we shared the goal of this engagement was to complete three products, a strategic plan, a comprehensive health needs assessment, or a CHA, and a framework for the development of a community health improvement plan, or CHIP, systematic multi-year process to improve overall health of a population. I am pleased to share that the strategic plan and the comprehensive health assessment plan health assessment has been or have been completed and the community health improvement plan is in the final stages of development the development of the strategic plan 2020 to 2025 involved all team members of the department this was done in collaboration with key stakeholders such as boat hospitals the federally qualified health centers the office of the governor and the university of the virgin s caribbean exploratory research center Our vision is to be a trusted system that supports a healthy Virgin Islands.
- 1:43:25 Our mission is to reduce health risk, increase access to quality health care, and enforce health standards. Our values speak to equity, community-focused, integrity, compassion, accountability, teamwork, inclusiveness and respect, and results-oriented performance. The comprehensive health assessment utilized secondary and administrative data sources to describe the health profile of the population and examine trends where applicable. The community health assessment guided the development of the Community Health Improvement Plan, a roadmap to improve the overall health status of the population. There is a link that you can actually tag into.
- 1:44:11 It is on our DOH website, reports and plan slash USVI Department of Health. The Community Health Improvement Plan or CHIP titled Healthy Virgin Islands 2030 aligned with the National Healthy People 2030 is designed to be a concrete blueprint for improving health for all by the year 2030. We again ensure that our key stakeholders, community health organizations such as hospitals, other governmental agencies, federally qualified health centers, and community-based organizations were at the table to provide input on our 2030 vision for the healthcare in the Virgin Islands. I would like to thank all 557 community members who took the time to complete the community survey, thus providing community input to inform selection of health priorities. priorities the chip is nearing completion pending additional into internal review and further input from the community the breakdown of the of the of our budget general as well as our health revolving the breakdown of the 28 million 563 642 dollars designated for general fund 0100 is as follows Other services, \$8,538,733. Personnel services, \$13,615,045.
- 1:45:53 Supplies, \$285,594. Fringe, \$6,190,564. capital outlay \$34,000. The breakdown of the \$19,580,390,000 recurrent federal funds or fund 3100 covering over 31 grants is as follows. Public service utilities \$11,000. Personnel services \$7,774,340. Capital outlay \$30,000. Fringe benefits \$3,767,409. Supplies \$4,702,119.
- 1:46:49 And other services \$3,295,523. The breakdown of the \$2,964,136 designated for the Health Revolving Fund is as follows. Public health utilities \$63,000. Capital outlay \$62,750. Supplies \$1,008,380. Other services \$1,830,006. The breakdown of the \$1,896,954 non-appropriated funds, which include the indirect cost fund, health casino fund, and emergency surcharge fund, is as follows. the utility, \$1,055,604. Capital outlay, \$90,175. Supplies, \$306,076. And other services, \$445,099. There's also a chart with the breakdown of the agenda fund for your review, Senators. Revenue cycle management. The challenges we have encountered due to changes in daily operations resulting from COVID-19 is reflected on our anticipated collections for fiscal year 2021 with a projection of \$2,800,000, which is lower than fiscal year 2020, collections of \$2,894,365. Revenues as of June 30, 2021 are \$2,152,796. Business Process Improvement. In 2021, the Chief Financial Officer right next to me and her financial team continued the business process improvement with ASTOM. Process improvements were later implemented in the areas of procurement, payment, processing, drawdown posting, and financial reconciliation reviews. The team continued virtual, bi-weekly coaching calls and meetings with the process owners and the accounting division in which evaluations of the updated processes were conducted. Additionally, some scorecards were created to measure our progress in all the business process improvement areas by inputting data monthly in SharePoint. We identified 92 improvements in procurement, 87% improvement in payment processing, 90% improvement in drawdowns, and 95% improvement in posting. Human Resources is going through the final phase of their recruitment process improvement training.
- 1:49:48 Once the training is completed, they are expecting to have a 38% improvement in cycle time. We were able to take advantage of the improved processes and good teamwork by the divisions Lee's and Center for Disease Control and Prevention partners. The Department of Health spent 97% of the Crisis NOFO award and that is the post-hurricane grants

that we were given, totaling \$4,284,949. To continue the sustainability and improvement we will provide ongoing and refresher trainings and conduct quarterly meetings with programs for feedback on challenges successes and recommendations in addition the sharepoint files will be continually updated to ensure new employees have access to our standard operations procedures checklists and training plans finally we will hold biannual process owner sponsor meetings to review and update processes consistent with the policy changes overall the business process improvement was a great success we were featured in the in march 2021 asto newsler under quality improvement for our great work below is the actual statement that was taken out sir lastly chief financial officer tatia monel uet uet gave an outstanding presentation on june 24 2021 at the asto webinar titled unlocking possibilities through process improvement to chief financial officers deputy commissioners ASTHO and CDC in the mainland. I would like to thank the process owners and financial team for their contribution hard work and dedication in making the entire process more efficient and effective. The Office of Procurement and Contracts Management and

1:51:43 reporting or OPCMR. The OPCMR and reporting was created pursuant to executive order number 493-2019 and facilitates the procurement process for goods and or services as well as leases for the department. OPCMR ensures adherence to all of the established policies and procedures of the the Virgin Islands Department of Property and Procurement in a centralized manner. Having all requests submitted to a central location allows for the uniform collection of required documents and overall control for resolutions of any issues. The OPCMR reviews quotes and solicitation, drafts agreements, facilitates the execution of lease agreements with the Department of Property and Procurement, gathers corporate documents from vendors, liaised with the Department of Property and Procurement, and all procurement for the department.

1:52:45 Since the establishment of the OPCMR, the department has participated in approximately 8 DVI-wide contracts with various vendors for servicing or services included but not limited to janitorial, ex-terminating, purchase of household cleaning services and supplies, security systems, and or Guard Services. The unit has also coordinated efforts with DPP to approve agreements that are attached to monthly reoccurring charges for fiscal year 2021, approximately 15 to 20. The same will be done for fiscal year 2022. The coordinated effort also resulted in the execution of 30 to 40 contracts department-wide. Some of the agreements were three to six months so have expired, but were nonetheless executed. Currently, there are 84 items on the list of pending agreements, solicitations, and vendor-paying pending leases that the unit is working on.

1:53:44 There are three executed leases, one on St. Thomas and two in St. Croix. The Office of Federal Grants is presently overseeing 65 projects with 85 single-budget totaling 66 million 7,900 since the pandemic the department has been awarded 21 individuals covert 19 grants totaling 25 million nine hundred and ten thousand seven hundred and twenty eight the awarding programs are epidemiology lab capacity for infected diseases ryan white care act title 2 immunization vaccine program maternal child health or mch program mental health and substance abuse services public health emergency preparedness and the national initiatives to address covert 19 health disparities among population at risk and on and the underserved including racial and ethnic minority populations and rural rural communities grant program nationally the COVID-19 grants were all afforded extended program periods to address the need of the community and to be able to acquire the vaccines and supplies needed again due to the COVID-19 pandemic our regular grants were afforded extended authority extended authority allows this portfolio of grants to expand their funding until it is done every program that has federal funds had to be requested, had to request this authorization from their respective grantor agency. The Virginia Department of Health has had no returns of any federal funds for this fiscal

1:55:33 year. Because health funding is critical and crucial to the well-being of the community, our grants have been allowed carryovers for funding that were unobligated. The VI Department of Health has one restricted grant in its portfolio which is the F707H state primary care office or PCO grant worth \$150,464. This grant is restricted because the central government did not receive its new indirect cost percentage. Department fiscal year 2019-2021 accomplishment. The Bureau of Human Resources and Labor Relations is responsible for the management and development of employees through the agency. We play a significant role in effectuating efficient operations by continually recruiting onboarding, supporting, payroll, employee benefits, performance management, training and development, labor relations and compliance. The goal of HR this upcoming year is to increase the level of efficiencies throughout the agencies by improving the functions of the HR division, which impacts the entire department. Accomplishments.

1:56:50 Led the recruitment efforts for the territory for the COVID-19 mission. This includes JFL, SRMC, private sector vaccine providers, and long-term care facilities. Recruited and boarded 58 team members to the Virgin's Department of Health. 26 part-time, 32 full-time employees successfully and boarded to include behavioral health staff, regulatory and compliance, maternal child care health, Office of the Commissioner of Federal Grants, Epidemiology, Maintenance, Virgin Islands Board of Nurse Licensure, Vital Statistics and Epidemiology. Reduced number of labor relations grievance

by 27 percent for fiscal year 2022 three per cases included 2021 sorry three case cases included continued engagement with astos to streamline the recruitment process our statistics number of employees in st thomas st john district 220 st croix 204 with a total of 424 employees number of For exempt employees, 46 on St. Thomas, St. John, St. Croix, 62, total 108. Number of separations in fiscal year 2021, 11, based on resignation, retirements, and other separations.

- 1:58:13 For vacancies, federal, we have 23, general fund, we have 54. All staff, we have four staff currently in Acton role that we're working on. Medical Services total actual staff as of 6.30, 19 EMT basic, EMT paramedics 8, and 10 intermediate. Fiscal year 2020 goals continue with the three-week projected onboarding of HR coordinator It will implement performance evaluation process throughout the agency. Fully developed criteria-based job description process in alignment with the Division of Personnel. Implement Public Health 101 trainings through Region 2 Public Health Training Center at Columbia University Mailman School of Public Health with assistance from our CDC Public Health Assistance staff, which is a PHAP program from CDC. The Bureau of Health Statistics, the Bureau of Public Health Services, Behavioral Health Alcoholism and Drug Dependency Services, or BHATS, the Division of Behavioral Health Alcoholism and Drug Dependency is charged with the provision of substance abuse and other behavioral health services throughout the territory, including Barbell Plaza Outpatient Clinic, the Charles Halwood Complex Outpatient Clinic, the Morrissey-Castro Outpatient Clinic, the Methadone Clinic also located at the Charles Halwood Complex, the Clubhouse, and our 32-bed co-ed psychiatric facility, the Eldra Shelterbrunn Residential Facility, of and has clinical and financial responsibility for patients at off-island residential facilities. This includes BHATS patients who demonstrate a need for residential treatment, general community members who are taken to court as a result of a pattern of unstable and dangerous behaviors and are thereby court-ordered into residential treatment, otherwise known as 722s and 723s, involuntary commitment status, inmates of the Bureau of Correction who are
- 2:00:29 found to need residential treatment, and clients of the Department of Human Services who are turned over to the Department of Health for case management, psychiatric care, and payment upon aging turning 18 years of age. The Division is recognized as a top priority clinical service area supported by the Governor's Executive Order 486-2019. There are various key accomplishments of the Division since July of 2030. These accomplishments included psychiatric services accompanied by some of the private entity entities it is actually extensive but i will continue to read until senator vla tells me not to key accomplishments of the division implementation of psychiatric telehealth services for our patients through a contractual relationship with island therapy solutions and beautiful dreamers collaboration with the federal emergency management agency or fema and substance abuse mental health services administration or samhsa to implement a community resiliency project in the territory in conjunction with two local partners island therapy solutions and insight psychological services it is a crisis counseling program available to all individuals in the territory helping our community understand their current situation regarding the pandemic and reactions reducing stress and providing emotional support promoting the use of development of coping strategies and connecting individuals with other people and agencies who can help them or provide support onboarded three new staff members at the clubhouse and five new staff members at the charles howard outpatient clinic including the clinical supervisor clinical therapist case manager and mental health worker he has provided an outreach and education series to St. Croix Educational Complex high school students through November and December. BHATS participated in various community programs including conversations with AARP to provide emotional support.
- 2:02:47 BHATS received three mobile outreach vans for the Territory 2 31-foot unit for St. Thomas and St. Croix and one 20-foot unit for St. John. The training for operation of the mobile units will be held in August of 2021, provided by Lifeline Mobile. We are scheduled to have an official announcement of the vans and services that will be offered later that same month with the implementation of the already developed outreach schedule for the use of the vans. BEHAT was heavily involved in the collaboration with former Senator Jackson's office and other community stakeholders regarding the establishment of the direction of the Office of Gun Violent Prevention.
- 2:03:37 BEHAD had a successful SAMHSA Virtual Site Visit Substance Abuse Block Grant. For the onset of the pandemic, BEHAD has provided several programs and presentations for the government of the Virgin Islands, beginning at home with the Department of Health, including the Breeding Clinic, Impassion, Compassion, Compassion Fatigue, and Self-Care, and Stress Relief at the Workplace. Provide a self-care workshop for the Department of Education's primary school teachers. Outreach services that took place both in person and virtually to include counseling related to fear and emotional challenges in the pandemic. Provide grief counseling to the Sports Park and Recreation, the Office of the Governor, Emergency Medical Services, and beyond. Increase collaboration with the Department of Human Services regarding case management, adult protective services, and Medicaid services.
- 2:04:30 implemented several new member trainings at the clubhouse. The clubhouse actually sees six to 10 clients served weekly. 14 clients served by virtual wellness checks via phone because of their hesitancy and discomfort to returning in to person

services. VHAT staff collectively has done a phenomenal job at participating on online trainings, demonstrating significant commitment and remaining abreast of advancement and best practices in the field to offer best care possible to our consumers. Continued involvement in interagency collaboration with VIPD, DHS, Office of the Governor, et cetera, to assist and relocate homeless patients or houseless patients. Residential patient services. Three patients returned to the Virgin Islands, one completely released from court supervision, three patients reunited with family, one transitioned to the independent live-in, and one successfully admitted to the residential for more restricted care and successfully discharged back to St. Croix. Outreach services continue. Despite all only having one outreach worker, territory-wide, the division has been able to have a great deal of outreach encounters over the last year. These encounters have included outreach education and events, assisting in crisis intervention, assisted in carrying out 7-2-2s and assisted in house-less encounters or resource linkages. Between September 2020 and June 2021, there have been a total of 717 encounters.

2:06:10 Please note that some of the categories of this, of actually the encounters overlap, creating a seeming inconsistency with the total. For example, a 7-2-2 or a commitment will account as a crisis intervention, but not every crisis intervention will be a 7-2-2. Our goals and plans for BHADS, including, for example, expanding the services of the division, including house psychiatric services in both districts, adding key personnel, case managers, clinical therapists, outreach workers, and nursing staff, and implementation of the mobile crisis team. We additionally plan to move towards phasing out the methadone program as a free-standing clinic and integrated medication-assisted treatment into the regularly outpatient clinics. As it pertains to Anna's hope, the Department of Health intends to submit a formal request to the legislature requesting to utilize appropriate funding for the architect and engineering as a necessary step to begin in construction. The proposed residential facility would also have separated space to provide both partial hospitalization program and day treatment services emergency medical service or ems the virginized emergency medical services is committed to providing the highest quality emergency medical free hospital care to our citizens on a daily basis staff members are called upon to enter the unknown at times here provided goes beyond the medical and mediator roles between family members regarding the issues at home at hand become more prevalent. They meet patients who are at the worst moment and the worst days of their lives.

2:08:00 As first responders, they can expect to respond to emergencies on land, sea, or near water, never knowing what they will find. The fact remains, however, they are always ready and proud to serve. Emergency Services Vehicles. In St. Thomas St. John District, we have a total of 22 vehicles, three of which are in St. John, 14 on St. Croix. With 800 individuals living with HIV in the USVI, the Communicable Disease Division remains focus on the vision and slogan, 340 Getting to Zero.

2:08:52 The slogan was adopted in collaboration with the proclamation signed by Governor Albert Bryant in July of 2020, making July HIV Awareness Month in the U.S. Virgin Islands. The goals of the 340 Get Into Zero campaign are 90% of the people living with HIV knowing their HIV status, 90% of people who know their HIV status will be receiving treatment, and finally 90% of the people on treatment having suppressed viral loads.

2:09:29 In calendar year 2020, the US FBI had 13 newly diagnosed HIV cases and 16 individuals who previously diagnosed in another jurisdiction relocated to the territory. We have had four new cases thus far for calendar year 2021. Additionally, the division provided direct services to 188 HIV positive clients in 2020. 82 clients with HIV received medication via Medicaid, 52 receive full payment medication via AIDS drug assistance program and 54 receive medications through co-pay medications assistance program as of the 188 individuals enrolled in care 70 percent of them are virtually virally suppressed i'll reread that of the 188 individuals enrolled in here 70 percent of them are virally suppressed. Viral suppression is the act of HIV medicine reducing the amount of HIV in the body or the viral load to a very low level or undetectable number that goes back to 340 getting to zero. Thus allows the immune system to keep working, prevents illness and if the viral load is undetectable eliminates risk of transmission of hiv during sex present percent of viral suppression this gives you an idea of of how the viral load act sometimes shifts back and forth january 2017 71.49 percent january 2018 72.40%, January 2019, 75.51%, January of 2020, 68.22%, and January of 2021, back up to 73.64%.

2:11:30 One of the Communicable Disease Division's key performance indicators speaks to the expression of viral loads. Like many districts across the nation, the communicable disease division reached a speed bump due to COVID-19. However, the division quickly adapted to ensure continuity of services while meeting grant requirements. The communicable disease developed processes to provide rapid COVID-19 screening to HIV-positive clients while supporting the Epi Division with COVID-19 screening to the general public. In June of 2021, The Division was recognized by Primary Care Development Corporation in the New England AIDS Education and Training Center for adopting a unique initiative during the pandemic by offering pop-up and drive-through COVID-19 and HIV testing. As a result of this recognition, the Communicable Disease Division was asked to present during the My Test, My Way, Lessons Learned and Innovations in the HIV Testing National Webinar to other health departments and community-based organizations on

innovative testing strategies. Keeping on the trends of being innovative, the Surveillance Unit became the first in the nation to fully implement our data reporting system on a secure cloud-based making it accessible remotely while ensuring continuity during man-made natural disasters. Notably, the Communicable Disease Division was recently awarded supplemental funding for the development of a disease intervention workforce to combat current and future epidemics. The Bureau of Regulatory Services. DOH's regulatory oversight services include birth and death certificates, burial permits, funeral homes tobacco control medicinal marijuana control and regulation food safety certificate of need medical malpractice clinician and allied health licensing and professional boards and

2:13:43 related health data collection the department's division of environmental health works to protect The community is held by permitting and regulating restaurants, retail food establishment, hotels, beauty salons, barbershops, tattoo parlors, spas, schools, daycare, and early child care education centers. The division also investigates environmental health complaints and outbreaks. The two main activities are food safety and general sanitation. Our accomplishments. Health inspectors completed mentorship training with the national environmental health association health space electronic inspection system has been implemented developed 12 division based protocols and environmental operations secure it infrastructure to conduct cloud-based inspection and real in real time staff was able to complete training in cosmetology safety pest control tattoo parlors inspection plumbing code and customer service Environmental health obtained an additional peace officer in St. Croix in April of 2021.

2:14:55 Challenges. Scope of work has increased since the pandemic, resulting in increased mitigation efforts. Lack of adherence to COVID-19 guidance and DOH regulations or protocols. Enforcement personnel meeting the increased demands for coverage. Despite that, we have goals. Our goals implement new fee schedule for administrative fees, which will project approximately \$5 million into the Health Revolving Fund. Introduce and mandate the enrollment of Serve Safe, a nationally recognized and American Standard Institute certified course on food safety and best practices for one to obtain a health card. Implement the National Environmental Assessment and Reporting System, which is a surveillance system used to capture environmental assessment data from foodborne illness outbreak investigation to improve the Division's Food Safety Program. Our Division of Professional Licensure and Health Planning.

2:15:59 The Office of Professional Licensure and Health Planning continues to charge to maintain the public's health and safety through licensing regulations for nine health professional boards and administration of the Territory's Certificate of Need and Allied Health Programs. The current boards are the chiropractic, dental, medical, optometry, pharmacy, physical therapy, podiatry, psychology, and veterinary medicine.

2:16:28 13 different license types are vetted through these boards. There has seen a marked increase in licensing issues, increasing access to healthcare services. Board members continue to maintain active relationship with the Federation Boards, keep abreast of current trends and standards, and help shape nationwide policies. Professional license collaboration continues with many inter and intra-governmental agencies and looks forward to realizing license automation for all Boards. The goal, upon the initial CON or Certificate of a Need Award, follow-up service will be conducted by the Regulatory Division to ensure clinical and life safety requirements are met rather than annual CON renewal.

2:17:15 And the goal is to submit an RFP proposal for a CON application update. The Immunization Division. The U.S. Virgin Islands Immunization Program serves as a regulatory component of the Department of Health that aims to prevent and reduce the risk and incidence of vaccine-preventable diseases for all Virgin Islanders. The goal of the immunization program is to prevent, promote and protect through education and collaboration to eliminate vaccine preventable diseases in the United States Virgin Islands.

2:17:48 The program provides access to vaccines for vaccines for children enrolled healthcare providers at no cost, enforced school and childcare immunization regulations, provide immunization, education and training health care providers and the public coordinate surveillance and control efforts for vaccine preventable diseases promote vaccine safety and develop effective partnerships the VA immunization program is charged and response with the responsibility of ensuring uninsured and under-insured population receive vaccination to prevent disease disability and death the immunization program is 100 federally funded and works cohesively with the center for disease control and prevention to ensure vaccines in the territory are up to date administered properly empower providers to increase vaccination and work to change the perspective of providers who do not administer certain vaccines for example eight the hpv vaccine address vaccine exemptions and hesitancy and utilize purpose-driven messaging to creatively communicate important vaccines via cross-section of resources as of 2018 the immunization program officially ended direct public services by becoming a regulatory constituent within the department of health this means that immunization program no longer administers vaccine but has transferred that responsibility to community health and maternal and childhood clinics. The immunization program supports these and other participating healthcare centers by supplying vaccines for patients who

are underinsured and uninsured and by annually surveying the providers for compliance and federal guidelines. Accomplishments include instrumental in positioning the territory to

2:19:45 receive COVID-19 vaccines simultaneously with the United States with the availability of COVID-19 vaccines in the U.S. in December of 2020 states and territories were obligated to plan the receipt distribution and administration of the first vaccine in their population register 37 public and private health care providers including pharmacies and federally qualified health centers to participate in the COVID-19 vaccination program. I would be remiss if I did not thank the following entities, the University of the Virgin Islands for their assistance by permitting the department to use their ultra-cold storage unit on St. Thomas as a vaccine hub, the VI National Guard for assistance with vaccine distribution and management, by TEMA for their support and logistics, and our federal partners included FEMA and the CDC for practical and technical assistance not to mention the fact that we actually were housed at the university of the virgin islands for our covid vaccine community centers the immunization program ensured equitable dissemination of all covid 19 vaccines once they became available pfizer moderner and jensen or the johnson and johnson the program work closely with the vaccination task force to make COVID-19 vaccines available to the public mass vaccination clinic or CVCs more vaccination strike team pop-up vaccination efforts outreach efforts and public education were instrumental to sustaining equitable access to vaccine and remain active today maintain consistent system development for the Virgin's immunization registry system or VAERS a cloud-based system re-established in January of 2020 closer to achieving complete connectivity to health care provider electronic health record where information will be automatically exchanged challenges significant reduction of annual generation general vaccination

2:21:51 for adults and children due to onset of COVID-19 programmatic activities related to vaccine for children were not prioritized with the focus on COVID-19 vaccination response efforts immunization vaccine efforts were postponed to 2021 season due to significant reduction of public response following the availability of COVID-19 vaccines our goals include finalize a data use agreement by July of 2021 which will allow bidirectional data sharing with CDC which makes the division eligible for continued funding to support system enhancement receive legislative approval for language of development by the program that will provide accountability for healthcare providers reporting a patient data occurrences the legislation will also classify clarify jurisdictional mandates for children adolescents and college-bound vaccinations prior to starting school relaunch influenza campaign in october 2021 and resume uptick of healthcare provider participation in the vaccine for children program vital statistics the department of vital statistics office of vital records and statistics is mandated by the vi code of register and preserve data relative to all vital events in the territory of the region of the United States.

2:23:20 BRS is responsible for the registration, maintenance, and dissemination of the territory's birth and death records. Birth records show that in October 2020 to July of 2021, St. Croix had 37 births, I'm I'm sorry, St. Thomas had 397 births, and St. Thomas had 257 deaths. St. Croix, 333 births and 297 deaths. In totality, total was 730, and in St. Thomas, 551. That is in reference to, of course, the St. Thomas births.

2:24:08 The VRS revenue generated as of June 2021 is \$100,051.11. Accomplishments. Implemented a new birth certificate template in November of 2020. A request for proposal was submitted for a vital records information management system. vendor was selected and the cost finalized. VRS applied and received \$200,000 grant from CDC to assist with the debt registry. The 2020 Live Birth Standard Certificate of Deaths and Fetal Deaths information were scanned, uploaded to SAM.gov and sent to National Vital Stats Rec System. The Department of Health will be reimbursed for the data sent to NCHS. The USVI Department of Health, VRS, and NATRO, and CDC, the project partners, conducted 11 trainings, two in-person, and nine virtual trainings to USVI professionals. This project focused on increasing the capacity of VRS to improve the disaster-related death reporting capabilities for USVI professionals with responsibilities and authorities for completing or processing debt certificates, including first responders, coroners from their home, staff and physicians, healthy facilities, healthcare facilities staff, USVI Department of Health staff, and staff from other USVI governmental agencies. The challenges, the scope of work have increased since COVID-19 pandemic.

2:25:48 Goals, clean and digitalize all VRS records by 2021 December, sustain online submissions of application for a certified copy of birth or death record by January of 2021, implement a new death certificate that played by November of 2021, increase fees for all certified documents at VRS by November of 2021, increase the registration of birth and death within five business days as received to 85% by September of 2021, Ensure both hospitals submit data electronically by December of 2021. The Bureau of Health Promotion and Disease Prevention. The Bureau of Health Promotion and Disease Prevention includes the chronic disease program, community health clinics, to include Morris de Castro Clinic on St. John, family planning program, infants and toddler program, maternal and child health and children with special needs care program, primary care office, public health laboratories, women, and infants and child program, or WIC. The chronic disease program. We have identified chronic disease, by the way, as our top priority for FY 2022.

Accomplishments is chronic disease. The USVI Department of Health executed a contract with Louisiana State University, or LSU, to resume the behavioral risk factor surveillance survey, or the breakfast, the first time the survey is being conducted since 2016. During the month of May, 130 surveys of the proposed 20,000 have been completed. You will receive a call from the VI Department of Health. We ask that you accept the call. The VI Department of Health Chronic Disease Program sub-grantee, the Sickle Cell Disease Parent Group, sponsored a candlelight walk on June 19th of 2021. World Sickle Cell Day to raise awareness about sickle cell disease. A key objective of this group will be working with the Department of Health and community partners to develop a Sickle Cell Registry. Plans for the final quarter of this fiscal year include offering free testing at local labs and an educational awareness campaign during September of Sickle Cell Awareness Month.

- 2:28:14 The Cancer Registry secures support from a vendor to improve data abstraction to facilitate submission of data and national program of cancer registries. A cancer registrar was hired and is in training to become a certified cancer registrar, improving sustainability of the registry. The department successfully executed a contract with the University of Utah to conduct data collection for its cancer registry. Chronic disease program staff coordinated and implemented six media campaigns, numerous outreach activities towards addressing chronic disease prevention efforts in the USVI. The program manager hired in February of 2021 successfully expanded over 90% of the crisis NOFO, Notice of Funding Opportunities Funds for the Asthma Project, resulting in a mural, a multimedia campaign, an extraordinarily successful virtual webinar with presenters from EPA and CDC. Our community health clinics in St. Croix, St. Thomas and St. John during fiscal year 2021 have been instrumental in the rollout and implementation of the COVID-19 vaccines through community health clinics and community vaccine centers, established in all three islands since the arrival of the vaccines in the territory in December of 2020. By the end of June 2021, 33,821 vaccines have been administered through the CVCs.
- 2:29:45 Additionally, regular clinic operations continued using telemedicine in an in-person way safely. Clinic providers in both districts served over 2,000 clients and conducted nine community health outreach events. The goal is to work with the chronic disease program and MCH in the development of a diabetes Registry to better capture data assessing findings and apply programs for processes to prevent increased number of diabetics in the territory. We are actually currently working right now with the University of Virgin Islands to submit for a grant for the Diabetes Registry. Family Planning Program.
- 2:30:31 From October 1, 2020 to June 30, 2021, the Family Planning Program has served 2,077 clients and submitted all required reports continuation grant applications to ensure continued funding, including approval of \$160,000 carryover and supplemental funds to support IT infrastructure upgrades. Our Infants and Toddler Program. The program met or exceeded 88% of our key program indicators. Maternal and Child Health and Children with Special Care Needs. Despite the onset of COVID-19 pandemic, the Maternal Child Health and Children with Special Health Care Needs, MCH and CSHCN provision continues to provide pediatric services to children and children with special health care needs between ages 0 and 21 in the territory. These services include pediatric newborn high risk special needs pediatric clinic, social services, immunization, audiology, physical therapy, speech pathology, neurology and neurology services.
- 2:31:42 Successfully contracted with the Caribbean Exploratory Research Center of the University of the Virgin Islands to complete the MCH Title V and Maternal and Infant Early Childhood Home Visiting Program Needs Assessment and numerous health campaigns. Produce notable virtual campaigns to include Let's Get Active obesity prevention campaigns reaching over 12,000 families on the first night and over 1,000 each week via Facebook. The oral health campaign conducted in collaboration with the American Dental Association, reaching over 500 children, territory-wide, Let's Talk Nutrition talk show featuring your panelists and staff from WIC and MCH and a virtual Let's Cook VI-style cooking activity. They conducted a mental health awareness campaign offering the Through the Sages of a Child Trunk or treat event and a building conversations around children's mental health. Collaborated with the Northeast Caribbean mental health technology transfer center to host a youth mental health first aid training at home visiting nurses. Conducted a relax, relate, release educators' mental health matters. Also worked with the Let's Talk Youth Mental Health Program. Highlight of the month's activities included drive-in movie night hosted in st thomas and st croix that reached over five reached over 500 families reading with a purpose activity integrated attention to both mental health and wellness through specific themes presented in the work of usvi and caribbean authors and virtual parent cafes hosting 27 families successfully conducted the early hearing detection intervention program scheme and they screened 72 children in early head start program the division continues to see children both zika positive mothers through a neurologist that
- 2:33:44 travels to the territory on a quarterly basis we are pleased to report that the telehealth equipment has begun to arrive in the territory plans are on the way to conduct second zika health brigade scheduled for the months of July and August, including the use of telehealth equipment. Our Primary Care Office. The U.S. Virginia's Primary Care Office increases access to quality health care through assessment, collaboration, and workforce development. The PCO is 100% funding

through a cooperative agreement with the Health Resources and Services Administration for \$150,464. The funding is authorized by Public Health Services Act as amended Title III, Sections 330 and 333. The three broad areas of activity covered by the PCO are statewide and territory-wide primary care needs assessment, shortage designation coordination, and technical assistance and collaboration that seeks to expand access to primary care services. During fiscal year 2021, the primary care offices accomplished all goals and objectives, including completing and submitting the U.S. Virgin Islands primary care needs assessment, which will be utilized for public health decision-making and coordination of statewide rational services area for, in addition, the PCO provided information session and technical assistance to primary health practices eligible for National Health Services Corps site certification.

2:35:24 This resulted in various sites being recertified and first private provider site in the territory achieving National NHSC new site certification. The territory currently has seven National Health Service Corporation Loan Repayment Program participants and one National Health Services Corps Scholarship participant program participant. The PCO collaborates with the University of the Virgin Islands School of Nursing to educate nursing students about scholarship and student loans repayment opportunities through the Nurse Corps scholarship and loan repayment programs. Through collaboration with the Office of Professional Licensure and University of Albany School of Public Health the PCO has conducted comprehensive service of physicians and dentists. The data data collected is being used to facilitate health planning efforts and maintain accurate records in the shortage designation management system which impacts the territory's opportunities to receive federal resources as a health professional shortage area. Territory Public Health Laboratory The public health laboratory has been essential to the territory response to COVID-19 pandemic the laboratory was successfully inspected by CLIA the certificate of compliance for the first time and I go back to say they obtained a certificate of compliance for clinical patient testing this is our first certified public health in the territory this has resulted in substantially improved capacity for high complexity testing and advanced

2:37:10 molecular and automated testing that was not previously available in the territory. The laboratory has also provided significant external support, provides training and distributed equipment and over 75 tests to local providers. Over the last year, the laboratory has provided support for over a dozen external clinical labs and organizations including the Bureau of Correction, Human Services and schools. Territory-wide laboratory testing has increased significantly during the pandemic and to date there has been over 138,000 tests performed for COVID-19. The laboratory has also provided daily support for vaccine storage and distribution community testing events and regular radio interviews. Women's infants and children are awake. The Virgin Ants Special Supplemental Nutritional Program for Women, Infants, and Children is 100% federally funded Nutrition Program for the Food and Nutrition Services of the United States Department of Agriculture.

2:38:21 The program provides supplemental foods and nutrition education at no cost, as well as referrals to other health care and social services programs and agencies to eligible participants. WIC participants are low-income pregnant, breastfeeding, and non-breastfeeding postpartum women, infants, and children up to age five key accomplishments for FY 2020-2021 include continue to maintain the highest breastfeeding rates in the nation, achieving a 70% infant breastfeeding rate, a 9% increase over the 2020 rate of 61, an 85% breastfeeding rate for women, an increase of 7% compared to 2020, and a rate of 12% for fully breastfed infants, an increase of 1% over 2020. Maintained WIC food vendor integrity by conducting vendor monitoring at 100% of WIC vendors, national regulations indicate do monitor about 5%.

2:39:25 Okay, Commissioner, I'm going to ask you to skip the accomplishments in the sense of time. Yes, of course. I was waiting for you. Ready? Epidemiology. I will go through epidemiology thoroughly, okay? The Division collects surveillance data to identify, prevent, and respond to current, emerging, and unknown public health threats in recent years. The Division has assisted the Department of Health and partners in detecting and responding to a variety of public health issues, including chikungunya, Zika, neurovirus, salmonellosis, leptospirosis, familiar doses, and most recently, COVID-19.

2:40:03 Federal funds for the program has increased significantly and is currently supported by the federal grants from the CDC Epidemiology and Laboratory Capacity for Infectious Disease. Grants, the epidemiology program is currently funded by federal grants. Typically, the amount awarded under the ELC mechanism is expected to be approximately 1.5 million annually. However, there was significant funding over the last year because of the COVID-19 outbreak and availability of supplemental awards. Epidemiology is a branch of science that deals with the control and prevention of communicable diseases in the community. The Epidemiology Division of the Virgin's Department of Health is a crucial component in the following service areas, investigating, intervening, and monitoring the occurrence of illnesses in the USVI, monitoring notifiable diseases reported by health care professionals and assisting them with case management, providing education and consultation of health care professionals, community group, and members.

- 2:41:09 Epi has been there for the public and will continue to be driving force for public health in the US Virgin Islands. In 2019 and beyond, EPI continues to build and joint efforts to respond rapidly to emerging health threats, modernized interdepartmental data sharing, and establishment of Territory's first public health laboratory. EPI primarily coordinates infectious disease epidemiology across territory. Currently, EPI is made up of General Epidemiology Program, the Vaccine Preventable Disease Surveillance Program and Influenza Surveillance Program, the U.S. Zika Pregnancy Registry Program and the COVID-19 Task Force. Clinical Services. Epidemiology does not provide any clinical services at the current time, however, it does provide pop-up testing for COVID-19 and blood draws for mosquito-borne viruses as needed and support specimen collection as needed for the covet update as of tuesday july 20th we have conducted 138 912 tests of which 4 249 have tested positive 134 663 have tested negative currently we have 165 active cases territory-wise 59 active cases on St. Croix 101 active cases on St. Thomas and five active cases on St. John our seven-day positivity rate continues to fluctuate but it is currently at 4.13 percent unfortunately there have been 33 fatalities related to COVID-19, all of the deaths were among unvaccinated individuals.
- 2:43:05 Additional news to our COVID report, the Department of Health has received confirmation from Yale University that the Delta variant of COVID-19 has been identified in the territory and will continue to push to get the Virgin Islanders vaccinated. I repeat, the Delta virus has been officially identified in the territory. We received that news yesterday. We indicated last week that we had a suspicion, and our suspicion was confirmed. The Department of Health Division of Epidemiology has been working with Yale University to test samples for COVID-positive cases. Thus far, 84 samples have shown to be variants from sequencing of 84 cases, 65 have been of Alpha variant, which is also known as the UK variant.
- 2:43:59 Six samples have been IOTA or B1351 beta and one sample Epsilon, B1429. Preliminary results show 12 samples were not confirmed to be any of the variants that have been previously identified in the territory. Full sequencing results now show that two of the 12 samples not previously identified in the territory are confirmed to be that of the Delta variant. Our hospitals continue to provide acute and critical care management of individuals presented with moderate to severe COVID-19 illnesses. The current number of hospitalizations are 20, 7 at JFL, 1 vented, 13 at RLS, with one vented. The hospitals also serve as the outpatient infusion centers for SARS-CoV-2 immunoclonal antibodies or MAB infusion. The MAB infusions are offered to individuals with mild disease who do not meet hospitalization admission criteria but have underlying risk factors that may cause progression to advance diseases. Mab infusions act as a prevention to advance COVID-19 related disease. It does not prevent COVID-related disease. You already have COVID disease and monoclonal antibodies are infused to prevent death and high hospitalization with attention to critical care. Even though this medical countermeasure has saved many lives and has prevented hospitalization, the vaccine is the safest and most secure way of reducing risk, reducing transmission
- 2:45:49 and saving lives, not just today but in the future as we continue to fight the pandemic. So far, we have administered 212 monoclonal antibodies infusion at Snyder Reader Medical Center, which also includes Myra Keaton and St. John. In June, 78 individuals received monoclonal antibodies, and in St. Thomas, thus far, 76 have been administered in July and counting. 48 monoclonal antibodies infusion have been administered in Wanglui Hospital. A total of 8 were administered in June, and thus far 18 were administered. Bureau of Facilities and Capital Projects are funding Hospital Preparedness Program Cooperative Agreement. This is Public Health Services, or Public Health Preparedness Services. Program. The HHP CoAg is a five-year program funded by the Assistant Secretary of Preparedness and Response. The focus of this funding is to improve patient outcomes and minimize the need for federal and supplemental state resources during emergencies and enable rapid recovery from catastrophic events through the development of healthcare coalitions. This program focuses on the four capabilities funding of healthcare and medical readiness, healthcare and medical response coordination, continuity of healthcare services, delivery and medical surge.
- 2:47:24 Funding from the program has been issued to pay core staff salary, purchase equipment for the hospital and for the division, purchase personal protective equipment as well as provide training opportunity to both hospital employees. The healthcare coalition. The division is currently working on establishing the Operational and the Virgin Islands Healthcare Coalition. The Healthcare Coalition are groups of individuals, healthcare and response organizations in a defined geographic location. They serve as multi-agency groups that support and integrate ESF-8 activities in the context of incident command systems, or ICS, responsibilities. The coalition will also help to solidify a strategic plan for the hospitals and public health system to follow in strength in the hospital system within the territory. The Public Health Emergency Preparedness Co-op Agreement is a five-year grant program funded by the Center for Disease and Prevention. The focus of the funding is to support strengthening the capability of public health systems to effectively prepare for a response to public health threats and emergencies. This program is built on its six domains of preparedness, community resilience, incident management, information management, countermeasures and mitigation, serve management, and biosurveillance. Emergency support functions eight, public health medical services.

- 2:48:59 Okay, before you continue with the one, Commissioner, so that we can get to some of the budgetary questions. Okay. You're very comprehensive as usual. I'm going to ask you to go, colleagues, for you to go ahead and continue reading. It's a lot of information that would allow us to learn what is going on with Department of Health. But at this time, I'm going to ask the commissioner to just go to the summary and the conclusion, and then we'll come back. Okay. And I know that you will be asking a lot of questions about our, and that's the land. Right. I saw that with the disaster recovery, and I'm sure that we're going to pull you before the disaster recovery committee and deep dive into those areas. But the information is here, so we already have a good background as to what is taking place. So we thank you for that.
- 2:49:43 Of course. And I also have someone from that project, the PMO office, just in case you have questions for them. Okay, so that would work out. Yes. Perfect. Okay. In conclusion, the Department of Health continues to fill critical vacant positions by offering training and educational opportunities. We will continue our successful public relations campaign geared towards informing and educating the community of health risk and trends as seen across the nation. We'll continue to be the leading agency serving as unified command for the emergency response during this COVID-19 pandemic and strive towards improving the quality of services to our community. Once again, I would like to thank Governor Bryan, Lieutenant Governor Roach, the IDOAID staff, and our collaborators, locally and federally. Our federal collaborators include ASTHO, CDC, Department of Health and Human Services, and FEMA through VITEMA and ODR for their strong support of the COVID-19 mission. In conclusion, Senator Kurt AVLA, the Department of Health is committed to reducing health risk, increasing access to quality health care, and enforcing health standards. As stated, COVID-19 has once again increased awareness in the importance of preventative care. In other words, public health. As always, the Department commits to building public health services that the community can trust and rely upon. We commit to collaborative effort with the members of the 33rd Legislature Senators. This includes our testimony. Thank you for your continued support. This ends our testimony. However, my team and I are here and gives you the opportunity to ask us questions, and we're ready to respond. Thank you so much.
- 2:51:21 And thank you so much for your comprehensive testimony. We're next going to go to the Virgin Islands Board of Nurse Licensure. You may proceed. Mr. Penn. You may proceed. Good afternoon. Good afternoon.
- 2:51:49 You may proceed Ms. Frenn. DIRECTOR DEWOLF- Okay I'm I'm coming. DIRECTOR DEWOLF- Good afternoon Senator Curtin-Vill-A Chairman Committee of Finance members of the 34th Legislature Office of the Commission of Health members of the Virgin Islands Board of Nurse Licensure the listening and viewing audiences. Thank you for the opportunity to present the Virgin Islands Board of Nurse Licensure Budget for 2022.
- 2:52:38 I am Tanecia Penn Chairperson for the Virgin Islands Board of Nurse Licensure. I'm joined by Mrs. Carmen Banfful-Romney Executive Director and Mrs. Arnel-Kamiseyung Treasurer of the Virgin Islands Board of Nurse Licensure and other members of the board virtually. The following summary of activities will highlight the board's work for the past year and clarify our budget request for the fiscal year of 2022. The Virgin Islands Board was created by the Virgin Islands Legislature to promote public protection and safety through the regulations of nursing practice in the territory. To date the board is fulfilling the purpose for which it was created. The board's duty is to ensure that we approve to duly qualify competent nurses to practice in the V.I.L. The board continues to have active membership in the National Council of State Boards of Nursing.
- 2:53:33 Board members represent the territory at the National State Board of Nursing in annual meetings and conferences. The role of VI-BNL is to ensure that only qualified applicants are approved to practice nursing in the territory. It is our goal to safeguard and ensure that members of our community receive quality nursing care during their time of illness additionally the role of VIBNL is to protect and defend the people of the Virgin Islands from illegal and dangerous nursing practices which is accomplished by a rigorous and comprehensive review process of all persons applying for licensure upon receipt of completed nursing application the VIBNL staff and board members perform a thorough review and vetting process once the applicant is approved by the board this president is eligible to practice nursing in the VI to be employed in the various healthcare settings and to contribute to the health and economy of the territory. VI-BNL is governed by the Nurse Practice Act in which standards of nursing care are clearly defined. The Nurse Practice Act specifies that that the board consists of nine members appointed to serve for two to three years by the governor.
- 2:54:49 VIBNL presently consists of six members. Five members would make a quorum. The board clarifies scopes of practice for all levels of nursing personnel. Means that each level of nursing advanced practice registered nurse registered nurses licensed practical nurses and certified nursing assistants are required to function within specific professional practice perimeters. All registered nurses and licensed practical nurses who hold active licenses issued within the territory can be verified by quick confirmed process via our nurses data board database sorry.

- 2:55:26 This quick confirmed report can be accessed and completed by the public employers and staff and agencies for free. The Nurses quick confirmed program assists in keeping the public nursing boards and other credentialing agencies form of nurses ability to perform ongoing safe quality care to patients across the United States and territories. We are working with nursing education programs in the territory to support education initiatives that would provide our community with qualified graduates.
- 2:55:57 We congratulate each of our nursing graduates of the class of 2021 from all nursing education programs. It was requested by the 2021 nursing seniors at the University of the Virgin Islands and it was granted approval by the board and not most students to sit the Pearson VUE nursing assistant examination. There are three types of licenses. Advanced practice nurses. Registered nurses. Licensed practical nurses. The VIVNL is also responsible for the certification of certified nursing assistants.
- 2:56:33 Advanced practical nurses and RNs renew their licenses on the odd years and the LPNs and CNEs renew their licenses and certifications on the even years. Today the B&L consists of a total of 1,338 licensed applicants via our nurses database. We break that down. 1,250 registered nurses. We have 89 practical nurses. However this includes excludes our Advanced Practical Nurses. We have a total of a total of 139 Advanced Practical Nurses. The Certified Nursing Assistants we have a total of 144. These numbers however do not include incomplete endorsement applications or incomplete renewals.
- 2:57:36 Okay. Ways in which the board carries out its rules as described above above. I will share a few. The first one VIBNL assists with and clarifies the scope of practice issues that arise for licensees in a variety of practice settings. These settings include hospital schools, clinics, private and group practices, industry, prisons, universities, nursing homes, group and private homes and other health related entity. VIVNL establishes criteria for initial licensure and recertification. We also certify and approve continuing education providers and programs to enable licensees to maintain their certifications. VIVNL reviews all licensees from applications of other districts and states who present for licensure in the VI. VIVNL as well protects the community by investigating all written complaints against a licensee or certificate holder and can result the authorized action on his or her credential finding proven violations of the Nurse Practice Act or the Certified Nursing Assistant Executive Order. Those are just to name a few. I'm gonna move forward with our major accomplishments for 2021.
- 2:59:01 It's great to say that VIBNL has maintained nurses database where we can easily generate demographic and statistical reports on all nurses practicing in the territory. So for now up we are 100% up to date in uploading those information and we continue to do that. Another accomplishment that we have we became part of the National Practitioner Data Bank for Advanced Practice Registered Nurses and this is a confidential information clearinghouse with the primary goal of improving health care quality and protecting the public and reducing health care fraud and abuse in the United States. We did another wonderful thing onboarding four new members to the board in December with three new members pending full body approval at which our membership will be at eight. Full board consists of nine members. We currently have two licensed practical nurses. one St. Thomas St. John and one on St. Croix. We have two varied nurse specialists.
- 3:00:07 Both are on St. Thomas St. John district. One late person on the St. Thomas St. John district. One nurse anesthetist on the St. Croix district. We'll be 8 members aboard after final confirmation by the Senate and the only position that will make us hold a complete board of 9 would be the position one late person from St. Croix. We were able to testify before the legislative body with regards to nurse compact licensure. We requested more time for deliberation was granted that opportunity. Thank you Senator Verley for that.
- 3:00:53 During this time we were able to allow the nursing community an opportunity to complete a survey to convey their support the survey revealed over 90 percent approval for the Virgin Islands to become part of COMPACT. This was a joint effort with the National Council of State Board of Nursing and Virgin Islands Nursing Association and we are thankful for the extended time and pleased to say that the board has listened to the nursing community and will support the efforts of Bill 34-0040.
- 3:01:25 We were also able to complete our move to our new site on St. Thomas at the VA Medical Foundation building. Our on-site website our online website is almost complete. Some additional details are needed to be finalized. Assistance is given by the Bureau of Information Technology. Our goal is to have the website completed by September 2021 to provide a portal for accessing online applications.
- 3:01:55 We also approved two nursing assistant programs in the St. Thomas and John district with a pending approval for one new nursing assistant program on the St. Croix on the island of St. Croix. These programs represent the first step in clients becoming certified nursing assistants. On July 9th 2021 we receive our executive contract for certainty. The Virgin Islands Board of Nursing is excited to announce that all nurses will be completing their applications online once

the onboarding process and training is completed. The online process should be up and running by September of 2021 this year. Okay moving forward to challenges. The board governs the licensure of nurses in our territory via the passage of 1981 Nurse Practice Act number 4666 Bill 14-0094 Section 415. Title III Virgin Islands Code Subsection 4 Powers and Duties Bylaws Rules and Regulations Certifying Officers. According to the bylaws for VIBNL the chair is a certifying officer. However after the expiration of the term of our chair in 2019 the previous two chairs or myself were not provided opportunity to sign off on financial documents.

- 3:03:20 We have had meetings with the Commissioner of Health and the executive team and made them aware of our findings. However we were told that the signatory had to be a part of the government of the Virgin Islands. The executive director who is the official operating officer of the board is part of GVI system. However we were denied the opportunity to be part of the accounting process of our documents in the unit system. Neither the executive director the treasurer nor I the board chair is any part in communication as it relates to the VI B&L and its finances. So moving forward to our new site, VI Foundation Building, we're very gracious that the landlord has allowed us the opportunity to occupy the property since December 2020. However, as of date, we are still owing many months of rental, including December 2020. The lease for the property has been processed since April 2020.
- 3:04:18 We are not in receipt of an executed lease for the same property. Without an executed lease our electric bills cannot be processed. The Virgin Islands Board of Nurse Licensure was not given preview of some communication of documents pertaining to this lease. Hiring processes. For almost one year the board has been trying to fill vacant positions. We lost the function of our compliance officer last September 2020 without due process by the board. This position is currently being utilized by the Department of Health and because of this the board is unable to fill this critical position at this time. The compliance officer is a potential employee for the board to execute its responsibility.
- 3:05:11 The completion for the hiring process of our administration specialist was filled in St. Thomas one month ago. We are currently waiting the hiring process for the same position of the administrative specialist on St. Croix. The board is encountering significant delays in the hiring process. Conscience Garda efforts to repair the old how the our old building site remains in progress.
- 3:05:51 So our proposed goals for 2022. Goal 1 to complete the hiring process for the staff of St. Thomas St. John St. Croix. Goal number 2 rules and regulations. Revise update and prepare rules and regulations for public hearing approval and signature. Update and complete the nursing the nurse practice act and rules and regulations. Goal 3 web building project continue the final stages of web building with Broom information of technology. Process should be completed by September 21. Our office space follow through on contract for both St. Thomas and St. Proy.
- 3:06:34 Renewal online registration begin the onboarding process with certimi. Completion to be done by September 2021. Compact state licensure support 34th Legislature in par in the passage of Bill 34.0040. Meet with stakeholders to assess to assist with the implementation process. Continue completing applications for all applicants requiring examinations. Licensure and regulation visibility increase community visibility of the IBNL to promote effective communication and education of the board's role policies procedures and to obtain feedback as we carry out our mission to protect the safety of the public.
- 3:07:20 Continue education for nursing community. Increase continuing education opportunities for our nursing community. As fiscal year activities are performed by the staff with assistance from the Department of Health payroll and financial services property and procurement for central government processes and contracts for professional services. Repositions and purpose purchase orders. The Department of Finance for federal processes and revenues and payables VM unit system.
- 3:07:55 We the board of BIA BNL. request \$536,885.10 from the general fund. This projected amount reflects salaries and bench branch benefits for 6 full-time employees property rentals and operating supplies. The breakdown for this is as follows.
- 3:08:33 Personal services. Personnel services sorry \$274,242. Fringe benefits \$134,049.10. Supplies \$38,594. And other supplies and services and charges \$90,000. for a total of \$536,885 I mean sorry \$85.10. We thank all those agencies who have assisted the B&L and with whom we have interacted over the years for their assistance in providing up with staffing and resources for training. We look forward to their continued support and achieving our stated goals as we carry out our mission of public protection and safety.
- 3:09:25 uh we wait we await any questions or concerns that you may have thank you for your testimony colleagues we're going to go straight into a rung of questioning we're going to begin with santa blyton six minutes thank you uh before you santa blyton um thank you senator getton so comment santa blyton thank you mr chair good afternoon again to my colleagues Good afternoon, Commissioner, Incarnacion, CFO, Human Resources, Jan Batis, and Assistant Director, Assistant Commissioner Sims, and all other management staff and support staff there. And thank you so much for that very

comprehensive testimony. Also, Ms. Penn, good afternoon to you and your team, and thank you for your testimony. I see, let me go to Ms. Penn quickly before I go to the Department of Health. I see there have been a lot of improvement with the board. I really want to thank you for that. It's much appreciated.

3:10:35 Commissioner Encarnacion, you have a large shoes to fill. And I must say you're doing a pretty good job, you and your team. I have some questions in terms of the budget, Senator Budgetarian. Let's start off on page 5 in the Postal Report, 5 of 34. Let me ask quickly. On our professional services, most departments I've seen come in here, I have seen an increase when it comes to personal services and French benefits. But they've actually decreased, even though it's not a large amount of 27,510. They have a decrease in the personal services, and they have an increase on the French benefits of some \$91,000. Can you explain the reason for that? Are there more federal funding in terms of folks moving over? What's going on in that space? Succinctly for me, please.

3:11:41 The commissioner, Mike, please. Commissioner, can I say, Mike? Mike, the mic for the commissioner, please. It should be working now, yes. Good afternoon. And I'll have CFO Hewitt explain the decrease. Hi, good afternoon, everyone. So the increase and decrease, the increase is due to, you know, retirement changing and also insurance. because sometimes, you know, new employees come on board and they have family insurance versus, you know, single.

3:12:24 Okay. Sometimes you have new mothers who have changed their family also. So what about the process of service? How many vacancies do you have, by the matter of fact? I'll defer that question to D.C. Joan Baptiste. How many vacancies do we have at this point? good afternoon senator i'm joan jabartis um i will answer your question right now so for this year we have a total of on our general fund we have a total of listed of 54 vacancies of which um 27 vacancies under the general fund we are actually halfway there in filling those vacancies at this point and how many um how many um have left due to retirement or separated sure eleven in total sir okay now let me go back to miss you it also on the same page when it comes to other services and charge there are 4.5 million dollar um variance from 13 to 8.5 why um the The reason for the variance is that our East End Medical Center, \$1,900,000, and also our Frederick Stead Health Center, \$2,150,000 was moved out of our general fund miscellaneous budget for a total of \$4,050,000, and the balance is due to shifting of funds to our Health Revolving Fund. Okay, that makes sense. Okay, thank you for that. to page 10 of 34, the federal grants. I note that the commissioner mentioned that there was no funds sent back in terms of federal funds.

3:14:16 But there are many, many, this chart is extensive, \$61.2 million balances. And many of those are different grants have expired. So, for those that have expired, are they extended? All of them? All of the grants have been given and extended on the authority. So, yes. Two minutes. Okay. So, as far as the grants, do we start utilizing all those funds? We can still. We have access to them until the funds are, until the grant actually period expired. So, we don't have to worry about that anymore. Okay.

3:14:55 I'm happy to hear that. That's very important. Okay. Very well. to page 14, outstanding obligations. I see you have six outstanding obligations by six different vendors, and they're all payment or in process for all of those vendors. Have any of them been paid thus far, or are they still in process? Senator, all of them have been paid so far, But currently, we do have outstanding obligations for the month of May and June for our off-island facility, and that's totaling \$1,273,244, and they are going through the process.

3:15:47 Some are at property and procurement, about \$713,265. Some at DOF for processing for payment, a total of \$154,950. Some are in-house for approval, \$174,468. and also some we just received from pending vendor information, the invoice of \$139,561. Okay, let's go to your contract listed on page 16. You have, again, an extensive list of different contracts, many of them at no cost, but some of them do have a cost. Some are also federal, and several of those also have expired, but there's no information in terms of where we're at with those contracts. So if at a later date you can send a listing of exactly where we're at, that would be much appreciated because there's no information in terms of what happens for those that have a...well, first of all, are they up to date, are all the contracts up to date?

3:17:02 We actually, we have another document that shows all our updated contracts. Currently, we have 85 pending contracts, 571 actually executed. DPP, they're right now working with our Office of Procurement. And right now, we have eight on our desks in preparation to send to DPP. We're working on them. Okay, thank you. And finally, Mr. Chair, your vehicle listing, you have a large fleet. but many of them are in poor or fair condition. Do you have a plan in terms of adjusting those on your fleet?

3:17:37 Oh, yes, actually. Basically, what we do on an ongoing basis, and I actually have our Deputy Commissioner as well as AD, Lee Evenin, would be able to speak to that, but we actually do the routine maintenance. That's basically what we do, and we try to keep up with our payments so that whenever we need a fleet fix, it's fixed. or members of the fleet fixed. Okay, very well. Thank you so much, Mr. Chair, for your time, and thank you for your responses. I wish I had more time for Ms. Uri, but I mean Ms. Penn, but nonetheless, I guess I want to drill down. Thank you so much. Thank you, Senator

Blyden. Ms. Uri, didn't we move Eastern and Freddison Health Center under Human Services last year? No, we didn't.

3:18:26 Okay. Senator Joseph, you're recognized. Thank you, Mr. Chairman. Thank you, thank you. Senator Joseph, Mike. Thank you. Thank you. Well, my name. Thank you. Yes, that's it. Thank you so much, Mr. Chairman, for the time. pleasant good afternoon to call my colleagues as well as the testifiers here today this was a very comprehensive testimony that we are receiving relative to the department of health as well as the board of nurse licensure my questions are going to also focus on your grants primarily i wanted to get from you you indicated that all the grants have been extended kindly indicate what is the extension date is it perpetual you don't have a end date for the grant currently no end date it's when the money is expended okay so you got a waiver from i guess your your cognizant agency or your funder to do that yes okay fine uh now you also represented in your testimony relative to your indirect cost rate that you don't have one is that correct yeah it's a the gvi index direct cost rate rate that we actually um are applicable to so currently cfo you would or actually have my director of federal grants on the line she would be able to speak with that director johannes can you assist with that please

3:20:14 it's good afternoon hi good afternoon my name hi my name is eleanor johannes i'm the director of the office of federal grants management and our indirect cost rate that we're using presently is 16.60 percent that rate came out in um in 2018 it's it's we get a one-year rate every year it comes you know over the entire gvi government of the virgin islands our rate is not calculated here but it also has to be vetted by the office of interior right so we are i understand that um and it has to be and this is from when 2018 you said so you don't have up to date or is it is it this this indirect cost rate is just extended this indirect cost rate is expired on 2019 but with permission from the various grantor agency they um they allowed you to use it well i was to use it okay good because Okay, thank you kindly for that remark. I want to ask you, Commissioner, because I was looking through some of the budget that you have with your personnel listing in our post-audit. and kindly turn with me to page 27 of 34 because there is a, I understand the hierarchy of the nursing profession. And I looked and I saw that an LPN,

3:22:07 a licensed practical nurse, is earning more than a nurse practitioner, which is at the high end. as far as professional nursing and i wanted to ask you how that occurs specifically 27 of 34 you'll see the licensed practical nurse the annual salary is eighty six thousand seven hundred and seventy five dollars and then you have at the very bottom of the chart here the nurse practitioner which is at the high level in a nursing profession and this nurse practitioner i understand could write prescription. You could tell me if I'm incorrect. And they're making \$84,550. What causes that? And if you could be really succinct, because I really want to jump on into the Virgin Islands Board of Nurse Licensure. Two minutes. I would actually have to look into that at Licensed Practical Nurse at \$86,775. That may be an error. So I'd have to look into that and then get back to you on that. Okay, granted. Thank you kindly. Now let's Let's move on to the Virgin Islands Board of Nurse Licensure, Nurse Penn and also Ms.

3:23:26 Carmen Vanderpool-Rumney. I noted in your testimony you've been having some challenges. You are actually occupying an area, I guess, is because your initial facility has been damaged for some time and now you don't have a lease but you're acting in trying to be operating in good faith and so you could have a an accommodation that is environmentally uh conducive for you to do your work what is causing you not to have your lease in place because that's troubling in to me. You don't have a lease for the foundation building complex that you're occupying?

3:24:12 Good afternoon. Yes, Senator. We don't have a lease for the property that we're residing in. Okay. What is your challenge? What is your challenge? Because that is not good. It is very poor management and I'm not blaming anybody because you need a place. So where is the hold up? What is the hold up and the bottleneck? DIRECTOR MACKEN- Okay so I'll defer on that question to Ms. Romney.

3:24:46 CARMEN BANTAPOOLE ROMNEY- Good afternoon. Carmen Bantapool Romney, Executive Director at Virgin Islands Board of North Licensure. We our contracts and our lease goes through the procurement office in through the Department of Health. Last I know of it it was at property and procurement. However for there are certain information and certain communication that the board is left out of in regards to our lease or contracts etc. So to really understand where it's at I will have to ask the procurement office Ms. Holly if she's available to answer you clearly on that because we are not we have limited information as to what's going on.

3:25:38 Thank you Mr. Chairman Mr. Chairman it is really placing the government in jeopardy if we are not able to have executed leases and have them we have an issue that they are unable to occupy their former location because of hurricane damages. Now they are forced to operate in a place where they don't have a lease. So I have some concerns about that.

3:26:07 And then also, Mr. Chairman, if I may ask one... You're asking the question to who? To the procurement officer to find out where we are with the lease. So Commissioner, if you would allow your procurement officer, and I do have if permitted to ask one more question. Go ahead. Ms. Harley's on the line. She would be able to respond to that. Darius

Harley. Good afternoon. Darius Dunlop Harley, Chief Procurement Officer, Department of Health.

3:26:40 In regards to the lease for VA border nurse licensure. They actually were occupying space in Roy Lester Snyder. and they move to the foundation building prior to the execution of the lease. Right now everything is at DPP. We're waiting for a board of nurse licensure to provide adequate proof of funding. That's not sure.

3:27:11 I have the emails to prove that. There is some kind of disconnect happening with the Department of Health and the Board of Nurse Licensure. Mr. Chairman, may I ask one final question? Go ahead. Just make it so simple. Go ahead. I will endeavor to do so. My concern is regarding in the nurse licensure testimony where they indicated a compliance officer was moved.

3:27:44 Ask a question by your answer. What happened? Why was the compliance officer moved from the Board of Nurse Licensure and into the Department of Health? And why haven't we freed up the funding for the Department, well, the Virgin Islands Board Nurse Licensure to have that position as a vacant position to be filled? Because that person is no longer there. You have a question. I'm going to let them answer. You asked several questions.

3:28:14 Okay. The compliance officer. The compliance officer. Okay. Why is it reflected on being the salary for that compliant officer? Is it being absorbed by your funding? Right now, it is actually being observed by the VI Board of Nurse Licensure. Why? May? Mm-hmm. Okay, good. We actually had a meeting with the VI Board of Nurse Licensure indicating that we were having some challenges between the Department of Personnel as well as DOH. We actually fixed that. So all documents were uploaded within the last week or so. So we should be able to resolve that within the next couple of weeks. And so, yeah, that has been, but the communication has actually been there. So they're aware. And then we also let them know that we will go back to OMB to ensure that whatever funds that we have expended using VI Board of Nursing Licensure funding, even though we were housing that staff, to give that money back to VI Board of Nursing Licensure. Very good. And to make them whole. Okay, Mr. Chairman, that concludes my questioning.

3:29:19 Thank you kindly. Thank you, Senator Joseph. Senator Vazquez. Thank you very much, Mr. Chairman, and good afternoon to everyone. Thank you to the Department of Health for the comprehensive testimony to be here this afternoon. I wanted to start off on your good afternoon, Commissioner, Commissioner, in regards to page 15, where you spoke about the ANAZO site, as you would imagine, I want you to expand a little bit in terms of the conversation regarding sending additional information down to the legislature to reappropriate the funding for E&E. Can you speak a little bit on what you intend to deliver?

3:30:02 Of course, Senator. Thank you for that question. So actually, we submitted to the Department work for requests or a scope and so that we can actually we went through an RFP for an A&E company. The Department of Public Work indicated they did not have the specialty to provide a scope for behavioral health services to that extent and so they are now indicating writing us a documentation so we can present to you that one two two two things one is actually more than 50 percent destroyed, so we actually have to remove that entire area and rebuild. That's one. And two, for the reuse of that money to an A&E, and we're now asking the Office of Disaster Recovery to use their A&E firm that works with them for that purpose. And it goes beyond that, Senator. We're actually trying to now secure other funding so that we can actually build once the A&E provides us with the build-out or the recommended build-out, so it's a long but. Office of PMO is also here as well as Deputy Commissioner Ren and Seal who would be able to maybe give you a little bit more information, but that's it in a nutshell.

3:31:14 Commissioner, we need to remove all the barriers that are preventing us from getting this thing completed or getting it done, and we're going to follow this, so we need to take time, night and what we need to do to move where we need legislation, then we need to really complete that. I think that we continue to spin wheels and be able to address this particular issue as it pertains to behavioral health. We need to remove the virus, whatever it will take to get this moving, Commissioner. I understand your frustration.

3:31:45 We continue to cooperate so that we can really make an impact in our mental health situation in the territory. I understand your frustration, sir. Thank you. Thank you. So in respect to the federal funds, some close to \$61 million, I heard you respond to my colleague in respect to the extension of the timeline on those federal monies. Do you have a self-imposed timeline? I know that a lot of this federal money is for services and be able to impact our community. The self-imposed timeline in which you intend to seek to expend some of this money again, and hopefully the members of this community could be a beneficiary of that expenditure?

3:32:39 We are expending them as we speak. And one of the things we spoke about is Epi and laboratory. Now we actually just all of our tests and supplies, Our PPEs are also expanded through that in terms of immunization, staffing to cover our CVCs. So we continue on a daily basis to expand those. Okay. I need to... Commissioner, what does the vital statistics have restricted hours only within half a day and sometimes three times a week? Only this last week and this week, and

that is actually because we, too, in the Department of Health, sometimes are affected by COVID.

- 3:33:19 Okay. So that's not a normal situation, it's just as a result of an outbreak? Yes, sir. Two minutes. I won't call it an outbreak, sir. I would recommend that we just, we had an exposure, and because of that reason, we had to make sure we reduced in terms of the safety of the staff and the community. Very well. Very well. I appreciate that. We actually monitor staff in schedules, staff enlisting, as well as hospital health, human services and our EMS, exactly when they work, when they call out.
- 3:34:03 It's not perfect, just like our staff, but we're really trying to get there. I was happy to hear your discussion in regards to your collaboration and work with Island Therapies. We had the opportunity to take the whole community of health hospital and human services through Island Therapies. I was amazed and surprised by the amount of services that they provide, so I hope that a continued collaboration as we move forward especially as we endeavor to address some of our behavioral health situation. In respect to the current modulus over at the Charles Harvard Hospital, do we have sufficient space there? Do we have adequate spacing and everything out at the module?
- 3:35:00 We do have adequate space in. We did have some issues in terms of mold in building one, and because of that reason, we actually had to evacuate. We moved out. Actually, my office is no longer in building one, and so is most of my team. We're actually in the process of moving the clinic from there up to the annex so that we can have a safer environment. But besides that, we do have adequate space. Time.
- 3:35:25 What's the morale of staff at this time? I know that they have a tremendous amount of responsibility and a heavy weight in the community. What is the morale of the staff? How are we working to address that? Taken at temperature, as we said in the report, Behavioral Health has actually extended their services first to our staff at the Department of Health and our breeding exercises have been done.
- 3:35:53 We've really been trying to, I have to tell you, our CFO, Tatia Monel Hewlett has made sure that we continuously provide incentives and provide gifts to the staff to let them know how much they are cared for, because in order for us to be able to care for the public, we first have to care for our staff. I can't say that our satisfaction at this point in time, because they work hard and they work long hours, but I think that they love what they do, and I think that brings there's a level of satisfaction that can be monitored.
- 3:36:27 Well, I want to, at this time, thank them for all that they continue to do under these tough COVID times, and we certainly appreciate their work, but, again, we've got to make sure that they're well. And if I could just wrap up with this final question or comment. You may conclude. I will ask that the commissioner to personally get involved in this situation with the board of nurse licensure sharing respect to their lease of contract so that we see to it that there is some movement to resolve that particular issue. I appreciate it. Thank you very much, Mr. Chair, for the time planning and Commissioner for your responses. Thank you. If I may respond to that.
- 3:37:05 We're working also with OMB to make sure that we secure the funding, especially since they began working in the building prior to the contract that lease was actually signed up. So we have to negotiate funding for that as well. And so that's kind of like one area of where the holdup is, but we'll work with OMB as well as board of nurse licensure to secure that. Okay. Thank you so much. I think we're probably going to need to have an offline meeting to discuss exactly who has oversight in terms of budget, et cetera.
- 3:37:36 But I'll speak to the chair and we'll see how we arrange that. The profile contract is a bit costly. It's costing us \$26.4 million a year if we go out there too. And I'm saying that your budget is \$28,663,000. Is there a possibility to renegotiate? I mean, that's really, really high compared to you having 400-plus employees and so much other areas that you must cover. That's literally almost the same as your budget.
- 3:38:08 Well, I would wholeheartedly agree with you with that. But what I would also remind you, too, is we're not just covering Department of Health staff and EMS. The amount is still, and there's always a way to renegotiate, so I'm always for renegotiating. Of course, they're paid for by federal funds, which is paid out, but still it's being paid for. And just putting a word out there to the owners that I think they need to revisit the present negotiation or the present contract, I think that they're getting quite a bit and We should be provided a better rate. They've been here for more than a year. We're thankful for the services that they have provided, but I think it's time for us to renegotiate. One of the things I'd like the public to know, Senator, if I may, they bring down staff, but they have actually hired a number of staff locally as well because we made that.
- 3:39:03 Okay, that's good. Senator, the graph. Good afternoon, thank you Mr. Chair, good afternoon colleagues, good afternoon testifiers and for how you're handling the COVID, kudos still, you know, and pass it on to your staff, excellent job to me. Thank you.

People named in this transcript

SUSPECTED, and a finding aid only. Names were matched by machine against the spellings used across all 426 of our transcripts, and the title is the one used in the room. Being named here is NOT evidence that a person attended or spoke · only that the name was said. Speech recognition mishears names, so a spelling may be wrong even where no alternative is offered.

4x	Governor Albert Bryan Jr heard in this transcript as: Albert Bryant, Bryan
4x	Senator Carla Joseph the surname alone also matches: Clifford Joseph; Karla J. Joseph heard in this transcript as: Joseph
4x	Senator Claudette Farrington heard in this transcript as: Claudia Farrington
4x	Senator Janelle K. Saro heard in this transcript as: Saru
3x	Senator Alma Francis-Heyliger heard in this transcript as: Francis Heiliger
3x	Lieutenant Governor Tregenza Roach heard in this transcript as: Roach, Tregenza A. Roach
2x	Senator Kurt A. Verley heard in this transcript as: Verley
2x	Senator Kurt VLA heard in this transcript as: Kurt AVLA
2x	Commissioner Luther F. Rene heard in this transcript as: Ren
2x	Senator Marvin Blyden heard in this transcript as: Blyden
2x	Commissioner Virgin Islands Department heard in this transcript as: Department

Bills and acts referred to

Matched by number against our own acts corpus. The number is what the recognition heard, so it may be wrong; where it resolved, the title is the one the Legislature gave the act.

Bill 34-0040	Act 8503 · November 18, 2021 · An Act amending title 27, chapter of the Virgin Islands Code by adding a new subchapter Va. establishing the Nurse Licensure Compact to create a multistate nursing license ---0
Act 8503	Act 8503 · November 18, 2021 · An Act amending title 27, chapter of the Virgin Islands Code by adding a new subchapter Va. establishing the Nurse Licensure Compact to create a multistate nursing license ---0

Referred to but not found in our acts corpus: Bill 14-0094, Act 4666