

**SAN LUIS OBISPO COUNTY
HEALTH COMMISSION**

Minutes of Meeting

Monday, March 9, 2009 (Board of Supervisors Chambers)

Members Present: Lynn Enns (Chair), Pam Heatherington (Vice-Chair), Jesse Arnold, Penny Chamousis, Ed Guerena, Pamela Munson, Susan Warren, Dawn Williams

Members Absent: Martin Craven, DDS, MD (excused), David Odell (excused), Robert Thielscher (excused)

Staff Present: Penny Borenstein, MD, Health Officer, Jean White (Recorder)

Speakers: Linda Cannon, RN; Tom Spillane, MD; Jonathan Stella, MD; Clint Slaughter, MD

Agenda Item	Discussion	Action	Who/When
1. Call to Order	Meeting called to order by Chair Enns at 6:02 p.m.	<i>Call to order</i>	<i>Chair Enns</i>
2. Approval of Minutes	Minutes of January 12, 2009 were approved as written.	<i>January 2009 minutes approved</i>	<i>Cha,mousis/ Heatherington/All</i>
3. Public Comment	Eric Greening referred to two propositions that will be on the May 19 th ballot that could raid and redirect funding from Prop 10 (First 5) and Prop 63 (MHSA). Mr. Greening encouraged the Commission to review these and any other of the propositions that would have a direct effect on health and make a recommendation to the Board of Supervisors relative to taking a position on them. He emphasized the importance of the public receiving as much information as possible prior to May 19 th to make a truly informed decision.		
4. Cancer Prevention, Early Detection, Treatment <i>American Cancer Society</i>	<p>Linda Cannon, R.N., American Cancer Society, is an oncology nurse and President of the Central Coast Chapter of the Oncology Nurses. She also works for Oncology Associates of the Central Coast. Ms. Cannon shared some of her personal experience as a cancer survivor and provided a Power Point overview on cancer prevention, detection and treatment. She talked about general health guidelines – exercise, diet, avoiding smoking, avoiding sun (except for limited exposures for Vitamin D) – and walked through a variety of diseases including lung cancer, breast cancer, cervical cancer, prostate cancer, colon cancer, skin cancer and blood cancers, talking about the causes, screening, and treatment for each. She provided data from the <i>2005 American Cancer Guidelines Facts and Figures</i>. This year in San Luis Obispo County, approximately 1360 people will be diagnosed as a cancer patient, with 500 cancer deaths. Since 1988, breast cancer incidence has been reduced by 8% and mortality has decreased by 29%. The mortality for prostate cancer has decreased by 31%. The American Cancer Society had a goal in the late 90's that there would be a cure for all cancers by 2025, and although probably won't make that goal, progress is being made.</p> <p>Commissioner Questions/Comments: Commissioner Heatherington asked about disposal of chemotherapy drugs, specifically if anything goes down the drain. (<i>Ms. Cannon replied there has been a lot of progress in disposal of chemotherapy drugs – nothing goes down the drain – everything goes into a special container and is destroyed appropriately.</i>) Commissioner Arnold asked about possible causes of chronic Leukemia. (<i>Ms. Cannon noted she is not an expert, but many of these patients are usually older and do well with treatment, living 15-20 years.</i>)</p>		

	<p>Chair Enns asked for more information on American Cancer Society’s role & fundraisers. <i>(Ms. Cannon provided information on upcoming events: Relay for Life (one at Cal Poly and one at Laguna Park in mid-July) and Daffodil Days in a couple of weeks. She also talked about support they provide to their patients, including wigs and transportation to treatments. Resources and brochures are available by calling them at 1-800-ACS-2345.)</i></p> <p>Public Comment: Eric Greening asked for more specifics on sun exposure and fat factor relative to cancer. <i>(Ms. Cannon answered “low fat” is important, but didn’t have detailed info on percentages or types of fats. She explained that length of time of sun exposure is dependent on how fast a person burns, but noted that many dark skinned people have gotten melanoma.)</i></p>		
<p>5. French Hospital Medical Center / The Hearst Cancer Resource Center</p>	<p>Tom Spillane, M.D., Medical Director, Hearst Cancer Resource Center, provided a Power Point overview of the cancer resource center, located at French Hospital. Dr. Spillane is an oncologist and talked about how the center came to be and the two people that made it happen – Dr. Tom Vendegna and Steve Hearst. The resource center opened in April 2007 and their services are continually growing and changing to meet the needs of the community. The resource center offers one-one-one counseling, nurse navigator, disease specific support groups, educational seminars, complimentary treatment classes (including Tai Chi & Reiki Therapy), laughter club, appearance center and patient assistance programs. The resource center has a library for patients with internet access and cancer resource directories. There are also other community resources integrated into the center, including wellness community, American Cancer Society and Cancer Connections. Their conference center has been set up with state of the art media equipment, so in the future they will be able to discuss cases and review information in real time with physicians at other locations. They have developed a “checklist” prescription pad for physicians to use to refer patients to the center, which has been very helpful in identifying services specific to each patient to help them heal. Dr. Spillane introduced Bev Kirkhart, Director of the Resource Center.</p> <p>Commissioner Questions/Comments: Commissioner Chamousis asked if the resource center was limited to SLO County patients. <i>(Center is open to anyone and translators are available. Mr. Kirkhart added that since they’ve opened, they’ve seen 4100 people, many from Nipomo and Santa Maria.)</i> Commissioner Heatherington asked if chemotherapy might be offered in the future at the center. <i>(Dr. Spillane explained that they really want to keep it as a resource center; a relaxing environment and less of doctor’s office.)</i> Chair Enns asked about staffing. <i>(Ms. Kirkhart answered that they have 3 paid staff and approximately 50 volunteers.)</i> Commissioner Munson asked about other complimentary therapies offered. <i>(Ms. Kirkhart talked about their laughing program, support groups and “healing bowls” which are new. They are talking about adding a 15 minute reflexology type of massage.)</i> Commissioner Warren asked how people can access information about their programs. <i>(Information and their calendar is available on the French Hospital Medical Center website at www.frenchmedicalcenter.org)</i></p>		
<p>6. SLO Radiation Oncology Center</p>	<p>Jonathan Stella, M.D., Coastal Radiation Oncology, provided a Power Point overview on radiation therapy. Coastal Radiation Oncology was founded in the 1970’s and they have 8</p>		

	<p>radiation centers on the Central Coast, with 13 Board certified physicians, 150 employees, and see over 3,000 cases a year. Radiation therapy is utilized in many types of cancer including breast cancer, prostate cancer, lung cancer, skin cancer, gynecological cancer, genitourinary cancer, neurological cancer and also lymphoma's, leukemia's, and head & neck cancers. Radiation is delivered with either curative intent or palliative intent. Dr. Stella defined palliative as being more for management of symptoms; not trying to prolong someone's life, but to make the quality of life better. Treatments can be planned from anywhere from 5 days to up to 8 weeks and can be combined with chemotherapy and/or surgery. The goals of irradiation are to be very accurate without damaging uninvolved critical adjacent tissues and without increasing overall toxicity to the body. Dr. Stella showed a picture of their equipment, noting how everything now is all digital, integrated with software treatment planning systems. He stated their mission is "to help their patients by providing the highest standard of care in radiation oncology in an atmosphere of openness, honesty, carrying and emotional support and clinical expertise."</p> <p><u>Commissioner Questions/Comments:</u></p> <p>Commissioner Warren asked about lymphedema and how common it is. <i>(Dr. Stella explained the most common lymphedema class is of the upper extremity after breast cancer surgery. Surgeons have backed off significantly over the years in the type of breast cancer surgery they do, from radical mastectomies to modified radical mastectomies, so the incidence of lymphedema has dropped drastically.)</i></p> <p>Commissioner Heatherington asked if there were head and neck cancer surgeons in the community. <i>(Dr. Stella answered that Dr. Stewart, Dr. Molin & Dr. Malotte are all excellent surgeons. He also noted that management of head and neck cancer has evolved away from surgery over the years and more toward chemotherapy and radiation. Complicated cases are referred, when necessary, to the university hospitals.)</i></p> <p>Commissioner Chamousis asked about training for their technologists. <i>(Technologists are all board tested, board certified.)</i></p> <p>Commissioner Arnold asked about the concerns of radiation causing cancer. <i>(Dr. Stella answered that smaller volumes of tissue treated reduce the risk of developing a secondary cancer. One thing that is worrisome is the number of whole body cat scans that people are getting. He did note that people who are being treated with radiation already have a predisposition to cancer, so it makes the statistics a bit mucky. When treating someone with curative intent, this is not one of the biggest concerns, unless it is a developing child.)</i></p> <p><u>Public Comment:</u></p> <p>Eric Greening asked about radioactive substances that may create a waste stream. <i>(Dr. Stella answered that radioactive substances are used in very limited small supply and have very small exposure levels that are disposed of safely.)</i></p>		
<p>7. Environmental Contributors to Illness & Cancer</p>	<p>Clint Slaughter, M.D., is an Emergency Physician at French and Arroyo Grande Community Hospital and is also on the Board of ECO SLO. Dr. Slaughter provided a Power Point presentation, titled "<i>Environmental Causes of Illness: Scratching the Surface,</i>" noting there are 85,000 industrial chemicals registered for use in the United States. He talked about some of the larger ones: lead, phthalates, Bisphenol A, Organophosphates, Perchlorates, and Volatile Organic Compounds (VOCs), describing what these are, where</p>		

they are most commonly found and some of the risks involved in using them. More than 46 agricultural, pharmaceutical and industrial chemicals have been identified as “hormonally active,” including pesticides, herbicides, and plastics. The cumulative effects of these chemicals is unknown. People are exposed through the air, building materials, household products, food --basically everywhere. Dr. Slaughter added that tobacco causes more than 450,000 deaths per year in the U.S., and is responsible for 30% of all cancers and 90% of lung cancers. He encouraged support of smoke-free public areas and parks to limit people’s exposure to second hand smoke. Waste runoff is another problem. In response to an E.coli outbreak, the FDA launched the “Lettuce Safety Initiative,” but later the permitting requirement for waste runoff was removed – taking a step backwards.

Dr. Slaughter talked about where to find quality information through FDA, EPA, National Toxicology Program, corporate manufacturers and patients with emerging illnesses, but noted there are mixed messages. The Risk Assessment Model requires that harm be “scientifically” proven before discontinuing a process or a product. The US Toxic Substance Control Act does not require chemical companies to perform basic health and safety tests on their products. The opposite of this is the Precautionary Principle “Rather than safe until proven harmful, chemicals should undergo at minimum a baseline human safety testing.” “Rather than asking how much harm is acceptable, we must determine the least amount of harm that can be achieved.”

Commissioner Questions/Comments:

Commissioner Guarena asked if there was a safety rating system for construction material. (Dr. Slaughter is not aware of one; people should look for products that say they don’t have VOCs, and otherwise assume they do.)

Commissioner Guarena asked about testing of sewage sludge. (Dr. Slaughter noted that sludge is fairly toxic and should not be spread on lands that are used for agriculture or anywhere near humans. He talked about ways to get rid of it – by breaking it down to its most basic components and using the gas that comes off it to make power.)

Commissioner Guarena asked for more info on references used. (*Dr. Slaughter will provide him a list of the references he used, along with a paper he wrote.*)

Commissioner Heatherington thanked Dr. Slaughter and noted that SLO Green Build has a very comprehensive list of leading materials in County and can provide direction as to the toxicity of one material vs. another. She also asked about availability of cancer statistics by zip code. (*It was noted that this information is available through the California State Cancer Registry and through some private companies*)

Public Comment:

Eric Greening asked about chemical exposures and correlation to children labeled with learning disabilities that live in areas where exposures are greater. (*Dr. Slaughter talked about the difficulty in answering because there are so many factors. He provided an example of Autism and the vaccination scare. Studies were done showing no scientific link. He explained that just because two things are happening, it doesn’t mean there is any causation relationship.*)

Commissioner Heatherington noted that the commission is on the record opposing sludge

	application, but the new turn key phrase is “toilet to tap.” Dr. Slaughter commented that we need to uncouple our “black water” from the rest of our water.		
8. Health Agency Report	<p>Penny Borenstein, M.D., Health Officer, provided a brief update on County budget. Last report from the County Administrative Office to the Board of Supervisors indicated that the gap between maintaining county services as they are now and the revenue that is expected in July is now estimated to be closer to 30 million dollars. The Health Agency originally was asked to devise a budget for next fiscal year that was 95% of the current year, but has since been asked to come up with a considerable amount of additional expense cuts. The Health Agency is working hard to identify ways to trim without doing significant harm. Public Health has already identified nearly 1,000,000 dollars of reductions from the GF budget.</p> <p>Dr. Borenstein noted that Public Health has seen a decrease in the number of patients seeking adult vaccinations, which has saved a bit of money on staff time, and is due to people not traveling as much, as well as other providers in the community now providing the vaccinations. But, there are other services that continue to rise in this economic climate – the CMSP Program has seen a 25% increase. The CMSP Program provides care for short term medical acute needs for uninsured adults.</p>		
9. Adoption of Smart Growth Principles into the County General Plan	<p>Commissioner Guerena introduced the topic and asked the commission to consider taking action in support of the adoption of Smart Growth principles into the County General Plan. He introduced Nancy Orton to provide an overview.</p> <p>Nancy Orton, County Planning Department, presented a Power Point presentation that provided history on the Childhood Obesity Prevention Task Force and the <i>Community Action Plan</i> that they developed in 2007. She gave examples of some of the <i>Community Action Plan</i> strategies, including wellness policies in County schools, Safe Routes to School projects, and incorporating Smart Growth principles into the General Plan. Smart Growth principles include creating walkable neighborhoods and promoting mixed-use projects in communities. The Board of Supervisors adopted Smart Growth principles several years ago and the Planning Department has now developed more detailed language to incorporate these principles into the County General Plan. She asked for support from the commission at the Board hearing this month, recommending incorporation of these principles.</p> <p>Public Comment: Eric Greening agreed with the recommendation in support of incorporating Smart Growth principles into the General Plan and encouraged the commission to also send a copy of the letter to the Board of the Council of Governments (the Regional Transportation Agency). Transportation funding priorities need to change in a different direction so that funding for pedestrian infrastructure and the bicycle infrastructure are on a par with road funding.</p> <p><i>Commissioner Heatherington made a motion that the commission write a letter to the Board of Supervisors with a cc to SLO COG recommending that Smart Growth principles be incorporated into the County General Plan. Motion seconded by Commissioner Chamousis. No further discussion. All in favor. Motion carried 8-0.</i></p>	<p>Action: <i>Motion carried 8-0 in support of writing a letter to the Board of Sups urging the adoption of Smart Growth principles into the County General Plan.</i></p>	
10. Health Commissioner	Chair Enns: Reported that the Bioterrorism Preparedness Advisory Committee has		

Updates	<p>changed their name to the Public Health Emergency Preparedness Advisory Committee (PHEPAC). The commission does not currently have a representative attending these meetings --Chair Enns has been receiving a report. Currently, PHEPAC is in the process of planning their first responder point of distribution site vaccination drill for next fall. Chair Enns also reported that there are several bills before our legislature regarding tobacco -- information on these is available at www.center4tobaccopolicy.org/bills.</p> <p>Commissioner Warren: Attended the Drug & Alcohol Advisory Board where there was an excellent presentation from the Templeton School District about voluntary random drug testing that is being done for students who are participating in athletics. It was very educational --the commission may want to consider receiving a presentation in the future.</p> <p>Commissioner Guerena: Attended the Childhood Obesity Summit sponsored by CenCal Health, where there was discussion about healthy foods in our schools. The fact was raised that many of our schools do not have kitchens and serve already prepared foods. Commissioner Guerena also attended the HEAL SLO meeting where information was provided on health education classes that Arroyo Grande Community Hospital will be offering, including classes on fall prevention, diabetes, Alzheimer's, nutrition & fitness and more). For more info call Arroyo Grande Community Hospital at 473-7662.</p> <p>Commissioner Munson: Reported on the Adult Services Policy Council from Jan, Feb & March where a lot of the discussion was focused on budget cuts and some of the programs in the community that are being affected. One of the subcommittees has been looking at continuity of care (gaps) in the community for people coming out of the hospital or for people who need help finding resources to remain independent in their environment. They have applied for a block grant that, if received, would help provide funding for implementation of a short term care management system for people in the community.</p> <p>Commissioner Heatherington: She and Commissioner Odell have been very busy with the Public Health Grant Community based organization grant review process.</p> <p>Commissioner Chamousis: No report at this time.</p> <p>Commissioner Arnold: Handed out brochures on the SLO Hep C Project and the AIDS Support Network. This is the 25th year of the AIDS Support Network. He also noted that May 19th is World Viral Day.</p> <p>Commissioner Williams: No report at this time.</p>		
11. Committee Reports	No committee reports.		
12. Prospective Future Items	<p>The Health Agency/Public Health Department will be holding a health fair on April 8th at the SLO Vets Hall, highlighting public health programs. Commissioner Heatherington suggested the commission may want to have a booth.</p> <p><u>April 2009:</u></p> <ul style="list-style-type: none"> • Public Health Laboratory Services -- Dr. Beebe, Laboratory Director • Prop 1E: Mental Health Services funding -- <i>possible action</i> • Prop 1D: Childrens & Families Commission (First 5) funding – <i>possible action</i> • Prop 218 Assessment Ballot -- Vector Control Program – <i>possible action</i> 		
13. Adjournment	Motion to adjourn at 8:30 pm	<i>Meeting adjourned</i>	