

**SAN LUIS OBISPO COUNTY
HEALTH COMMISSION**

Minutes of Meeting

Monday, June 8, 2009 (Board of Supervisors Chambers)

Members Present: Lynn Enns (Chair), Jesse Arnold, Martin Craven, DDS, MD, Ed Guerena, Pam Heatherington, David Odell, Susan Warren, Dawn Williams

Members Absent: Penny Chamousis (excused), Pamela Munson (excused)

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

Speakers: Christine Gaiger and Janet Botta, SLO County Public Health Dept; Bob Gedert, California Product Stewardship Council

Agenda Item	Discussion	Action	Who/When
1. Call to Order	Meeting called to order by Chair Enns at 6:03 p.m.	<i>Call to order</i>	<i>Chair Enns</i>
2. Approval of Minutes	Minutes of May 11, 2009 were approved as written. Commissioner Warren thanked Dr. Borenstein for the follow up information clarifying that the incarcerated population is included in the total # of cases reported on the back of the PH Bulletin, and that the numbers are separated out in the annual Health Status Report.	<i>May minutes approved.</i>	<i>Odell / All</i>
3. Public Comment	Walter Heath, Morro Bay, Chapter Co-leader for Health Care For All , asked the commission to consider scheduling a presentation on State Senate Bill 810 when they meet in July to discuss agenda items for FY 2009/10. SB 810 is slated to go back to the Governor's desk for signature in September of 2010. Mr. Heath or a representative from <i>Health Care For All</i> would like to make a presentation to the commission as soon as possible, and will bring forward resolutions from other California cities supporting this bill. Ultimately, they would like to get endorsement of SB 810 from the San Luis Obispo County Board of Supervisors.	<u>Handout:</u> <i>Health Care For All California bookmark</i>	
4. SLO County Public Health: Reportable Diseases and Response	<p>Christine Gaiger, Supervising Public Health Nurse, SLO County Public Health, provided a Power Point presentation overview of Public Health's Communicable Disease (CD) Program & staffing, and explained how reporting and investigations are done. She explained how the Public Health Department (PHD) responds to reports of diseases & outbreaks; collects & tabulates reports, provides assistance to the medical community, schools and other facilities; distributes policies & guidelines; and informs & educates the public about diseases present in the community, recommending prevention measures. Mr. Gaiger provided a copy of the <i>Confidential Morbidity Report (CMR)</i> form – that includes a list of all reportable diseases. She explained the basic concepts in disease transmission, talking about agent-host environment, and defining incubation period, period of communicability, mode of transmission, attack rate, mortality rate, outbreak, case, and contact. Ms. Gaiger outlined the steps involved in investigating an outbreak and turned the presentation over to Janet Botta, who walked through each of the steps as related to PHD response to a cryptosporidium outbreak in 2004.</p> <p>Janet Botta, Sr. Public Health Nurse, SLO County Public Health walked through the steps of PH's response to a cryptosporidium outbreak in 2004. She explained how they verified the existence of the cryptosporidium outbreak after receiving an initial report from a concerned parent that her daughter and numerous of her daughter's friends became ill with similar symptoms after attending an afterhours party at a water park. After receiving lab confirmed cases and reports of more being sick, EH did an assessment of the pool and the State Communicable Disease Branch was contacted in consult. The PHD prepared for the</p>		

	<p>investigation and developed an investigation tool in conjunction with the State Health Department. They developed case definition, identified and interviewed persons who attended the party and employees of the water park, and did sampling of those who met case definition. The investigation looked for commonalities and symptoms of illness. All data was analyzed by the PHD Epidemiologist and the State Epidemiologist. Reports were prepared following the outbreak with recommendations and lessons learned. A total of 407 people were exposed, 336 were ill, 6 were hospitalized and a total of 59 lab confirmed cases. Fact sheets with information on Cryptosporidium and ways to prevent transmission were distributed widely to various groups in the community, including physicians, hospitals, pool operators, schools, and restaurants. Data collected and analyzed from this outbreak was very helpful in the overall community of recreational water, and was presented at the CDC in Atlanta.</p> <p>Commissioner Comments/Questions:</p> <p>Commissioner Arnold asked for more information on whether this organism had a human or animal host. Dr. Borenstein explained how organisms can change and that at varying points in time, the host can be human or animal or both. This particular one proved to be a human variant.</p> <p>Commissioner Heatherington asked if there were regulations in place for water parks and public recreation facilities with pools requiring them to super chlorinate. Ms. Gaiger talked about how regulations have become tighter as a result of this outbreak, and that recommendations are now made to super chlorinate.</p> <p>Dr. Borenstein commended the CD nurses and staff, noting that 87 different organisms are reportable and that an outbreak can be one case of something rare, such as the recent tick-borne relapsing fever, or hundreds & hundreds of cases. She recognized CD staff’s extreme knowledge and thanked them for the tremendous amount of work they do daily behind the scenes in keeping the population safe.</p> <p>Commissioner Warren asked about Public Health’s involvement in outbreaks and investigations at public institutions & with the homeless population. Janet Botta is the liaison to CMC, ASH, and County Jail, and works closely with them, providing them guidelines and recommendations. PH has gone out to these facilities on specific instances. Public institutions are extremely knowledgeable about regulations and reporting. PH also works closely with the homeless shelters. Most private providers are good about reporting, but Dr. Borenstein used this as a reminder to those who sometimes get too busy, or don’t realize something is reportable). The Health Department has good communication with CHC and Dr. Borenstein meets regularly with their medical director.</p>		
<p>5. Product Stewardship: Impacts on Public Health</p>	<p>Bob Gedert, California Product Stewardship Council provided a Power Point overview of the California Product Stewardship Council (CPSC), explaining their mission “<i>to shift California’s product waste management system from one focused on government funded and ratepayer financed to one that relies on producer responsibility.....</i>” He explained Extended Producer Responsibility (EPR), “a strategy to place a shared responsibility for end-of-life product management on the producers, and all entities involved in the product chain,</p>		

	<p>encouraging product design changes that minimize a negative impact on human health and the environment at every stage of the product’s lifecycle.” Mr. Gedert talked about the “explosion” of product waste stream, many toxic by design, including batteries, electronics, fluorescent tubes, & cell phones.</p> <p>Mr. Gedert brought specific attention to disposal of sharps. Sharps disposal into the trash became illegal last year and although San Luis Obispo is setting up a government funded collection program, but Mr. Gedert explained how EPR presents an opportunity for producers to take responsibility for these products. He asked for the commission’s support of SB 486, a bill that would require pharmaceutical manufacturers who sell or distribute medicine that is self-injected at home, to submit to the State Integrated Waste Management Division a plan for safe collection and destruction of sharps waste.</p> <p>Mr. Gedert also asked for commission’s support of SB 26, a bill that would authorize pharmacies to accept the return of home-generated pharmaceutical waste and home-generated sharps waste and require the Board of Pharmacy to work with other state agencies, local governments and pharmaceutical companies.</p> <p>Mr. Gedert referred to AB 283, a bill that would create the California Product Stewardship Act and put into law the EPR framework adopted by the California Integrated Waste Management Board to administer the program. This bill is currently on hold at the State, but will be re-introduced next year and Mr. Gedert asked for support from the commission as this bill goes forward.</p> <p>Mr. Gedert emphasized how EPR addresses multiple issues of illegal disposals, impacts on the environment, impacts on human health, and impacts on the waterways, and asked the commission to include EPR in their legislative platform, as well as consider writing a letter of support of EPR systems in general to CPSC. CPSC offers sample resolutions and many cities and counties have passed EPR resolutions. An updated list and more information is available on their website at www.calpsc.org.</p> <p>Mr. Gedert asked the commission to consider supporting these bills and EPR in general at their upcoming retreat.</p> <p><u>Commissioner Comments/Questions:</u></p> <p>Commissioner Odell asked about the recycling process that is currently implemented in SLO County. Mr. Gedert explained that recyclables are sorted on an assembly-line conveyer belt, which is effective, but local recycling strategies are not enough to reduce the tons of waste disposed of in California annually, particularly sharps and other hazardous materials..</p> <p>Commissioner Heatherington commented on the large amount of drugs that are delivered by pharmaceutical reps to physician offices that aren’t used. Mr. Gedert agreed and noted that many physicians are receiving too many and do not have the proper means to dispose of them.</p> <p>Commissioner Guerena commented that HR 1191 at the federal level would have to take</p>		
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	<p>place prior to the passage of SB 26. Mr. Gedert agreed – this will require two steps – SB 26 needs the federal authorization first for the take back of controlled substances, but the state legislation is needed for state retailers to be released from the legal liability.</p> <p>Commissioner Craven asked what happens to the extra \$25.00 that is paid when a person purchases a television set. Mr. Gedert explained that this is an example of a government collection system that doesn't encourage EPR. CPSC is looking for a system where the money goes through a manufacturer EPR system, and not into a State pool of funds. The State's role would be to monitor and ensure the EPR system works.</p> <p>Commissioner Arnold asked about the percentage of pharmaceuticals entering the water system after excretion from the body. Mr. Gedert noted there was a recent study done that identified the percentages of unintended flow (but he did not have specific information).</p>		
<p>6. Health Agency Report</p>	<p>Penny Borenstein, M.D., Health Officer reported on the following:</p> <p>State Budget: The Health Agency could be looking at another 1.2 million dollars in reductions if the Governor's proposal is adopted -- approximately \$560,000 dollars in reductions to Public Health, with the vast majority in AIDS and HIV prevention, case management, education and testing; and some smaller reductions proposed in the Maternal and Child Health Program and the Breast Cancer Early Detection Program, as well as a roll-back of the rate of reimbursement for family planning services. Healthy Families is also on the list of potential reductions, which would have an effect on California Children's Services (if State dollars went away the County may have to pick up a greater share of the cost to provide those services). Also proposed is an approximate \$600,000 reduction to Behavioral Health in the area of adult outpatient treatment (Prop 36).</p> <p>County Budget: The County reached an agreement with the SLOCEA Bargaining Unit, wherein they have agreed not to have any increases in wages for FY 2009-10. This amounts to some cost savings for the Health Agency that will be utilized to fill positions that were slated for elimination on July 1st until January 1, 2010. Also, some of the money will go to one-time only purchase of resources that are needed. Some \$\$s will be held in reserve to see what happens with the State budget reductions.</p> <p>Title 5 Maternal and Child Health Block Grant Funding: PH is working on finalizing the 5 year Maternal and Child Health Needs Assessment, which has to be completed every 5 years by local jurisdictions for the State to submit to the Federal government, prioritizing maternal and child health needs. The assessment includes an updated evaluation of 27 health indicators. A work group has been convened to evaluate and prioritize. In summary, the areas of focus for 2010-2014 will be access to care, perinatal substance abuse, and adolescent risk behavior.</p>		
<p>7. Health Commissioner Updates</p>	<p>Chair Enns added an action item to tonight's agenda for discussion on the loss of funding for the public broadcasting of Health Commission meetings. She voiced her concern about the loss of the educational outlet that the broadcasting has provided. Commissioner Odell noted that the primary role of the Health Commission is education and if broadcasting were eliminated, the commission would become strictly an "internal" board. Commissioner Craven</p>		

asked about the cost and commented that it is hard to tell how many people are watching. Commissioner Heatherington noted that she receives comments from people regularly who are watching the meetings and that the commission has a stellar reputation for bringing community issues to the forefront. Commission Warren agreed that this is a very important service, providing the community a podium to come forward and ask questions. She would like to see the commission take a vote on forwarding a letter to the Board of Supervisors asking that funding be restored. Commissioner Guerena commented on the importance of keeping the public informed on all public health issues, especially now, when healthcare across the nation is going to be debated.

Public Comment:

Nancy Castle, Co-owner/AGP Video, commented that AGP Video has been filming the commission for approximately 9-10 years. Over the past 12 month period, they have billed \$6,052 for these meetings, less than the \$10,000 budgeted. They “stream” the meetings live, re-play them throughout the month, and place the meetings on the Internet, where they can be viewed at www.slospan.org. She encouraged the commission to recommend that the funding be continued. Part of AGP’s mission is to make government accessible to the community. She suggested ways that AGP could possibly help to amplify some of messages the commission wants to get out.

Supervisor James Patterson provided testimony that people do watch the meeting and noted that although these are challenging fiscal times and there is a need to be frugal and careful about spending County revenue, it is also important to be accessible and to engage the community in conversations. He believes it is important to continue broadcasting, not only with the Health Commission, but other commissions and boards that are televised. He talked about the added value of having the meetings available online, so persons who miss viewing the meeting or who are unable to attend the meeting, have an opportunity to “tune in” later. He encouraged the commission to communicate to the Board whatever action they take as soon as possible, with budget hearings beginning on Monday.

Motion made by Commissioner Heatherington to send a letter to the Board of Supervisors recommending that the funding for the televising of the Health Commission meetings be continued. Motion seconded by Commissioner Odell. No further discussion. All in favor.

Commission Odell encouraged commissioners to individually contact their supervisor and inform them of what the consequences would be if this funding were cut.

Commissioner Williams: No report.

Commissioner Arnold: No report.

Commissioner Heatherington: No report.

Commissioner Odell: No report

Commissioner Warren: Attended the Drug & Alcohol Advisory Board meeting where there was discussion about the Prop 36 loss of funding, and the fact that this is still a mandated program. Also discussed was the state ruling in regards to the Casa de Vida program (a

	<p>substance abuse residential treatment program for women & children), which was recently shut down. They were hopeful the funds would be reallocated to a similar program in the County, but they will not be. They also talked about a new prevention program for parents to help educate them on liability issues related to hosting parties with alcohol for under aged kids.</p> <p>Commissioner Craven: Attended the Oral Health Coalition last week representing the Health Commission and the Partnership for the Children (Clinica de Tolosa). “Give a Child a Smile” volunteer dentists had their 3rd session last Saturday (seeing children without a dental home once per month on Saturdays), and finished the first group. Next month, the clinic will begin taking new children (school nurses are notified of this). Commissioner Craven also reported that Clinica de Tolosa had a fundraiser last Saturday and raised more than \$15,000. They currently have 2 full time dentists, and would like to double their space. They will be approaching the County to see if they have any other property available at subsidized rent.</p> <p>Commissioner Guerena: No report.</p>		
<p>8. Committee Reports</p>	<p><u>Nominating Committee:</u> Commissioner Odell reported that the Nominating Committee met and brought forward the following recommendations from the committee:</p> <p>1) Recommendation for new officers for FY 2009-10: Chair – Pam Heatherington; Vice-Chair – Ed Guerena; Secretary – Penny Chamousis. <i>Motion made by Commissioner Odell to accept the recommendation of the Nominating Committee for new officers, seconded by Commissioner Arnold. No further discussion. All in favor.</i></p> <p>2) Recommendation for new “Consumer” representative: Gina Kirk <i>Motion made by Commissioner Odell to accept the recommendation of Gina Kirk as new commissioner and forward the recommendation to the Board of Supervisors for final approval. Seconded by Commissioner Arnold. No further discussion. All in favor.</i></p>		
<p>9. Prospective Future Items</p>	<p><u>July Retreat:</u></p> <ul style="list-style-type: none"> • Discussion of agenda items for FY 09-10. • Commission Heatherington suggested she would prefer to pay for her own dinner at the Health Commission retreat, due to budget reductions. Chair Enns asked what others thought. No noted objections. • Commissioner Arnold asked that consideration of Mr. Heath’s request for a presentation on Senate Bill 810 be discussed at the July retreat. Commissioner Arnold also asked that an action item be included on the July agenda for consideration of writing a letter to the Board of Supervisors asking them to encourage Representative Lois Capps to consider national single-payer health care. 		
<p>10. Adjournment</p>	<p>Motion to adjourn at 7:55 pm</p>	<p><i>Meeting adjourned</i></p>	