

**SAN LUIS OBISPO COUNTY  
HEALTH COMMISSION**

Minutes of Meeting

Monday, September 8, 2014, 2014 (County Board of Supervisors Chambers)

Members Present: Lynn Enns (Chair), Corliss Campbell, David Clous, Claire Grantham, Kris Kington-Barker, James Pope, Jean Raymond, Mary Jean Sage, Susan Warren  
 Members Absent: Scott Smith-Cooke  
 Staff Present: Penny Borenstein, Jean White  
 Speakers: Dr. Steven Van Scoy, Dr. Nisha Abdul Cader, Dr.

Agenda Item	Discussion	Action	Who/When
<b>1. Call to Order</b>	Meeting called to order by Chair Enns at 6:00 pm.	<i>Call to Order</i>	<i>Chair Enns</i>
<b>2. Approval of Minutes</b>	Minutes of August 11, 2014 were approved with a correction to Commissioner Campbell’s name on Page 4, under Item 5-ACA ( <i>Commissioner Corliss s/b Commissioner Campbell</i> ).	<i>August 2014 minutes approved.</i>	<i>All</i>
<b>3. Public Comment</b>	<b>Chair Enns</b> opened the floor to public comment. <b>Susan Warren, Director of North County Connection</b> , announced that September is National Recovery Month and that there are events going on around the nation on drug & alcohol awareness and to help people understand that “people do recover.” On Saturday, September 20, 7:00 pm, there will be a candlelight vigil, sponsored by North County Connection and the Kayla Peach Memorial Foundation, at the Atascadero City Hall Steps / Sunken Garden Area to remember those we have lost to overdoses and suicides in the county. This event is open to the public.		
<b>4. Substance Use and the Impacts on the Health of our County &amp; Children</b>	<b>Steven Van Scoy, MD, Medical Director, Neonatal Intensive Care Unit, Sierra Vista Regional Medical Center</b> , presented a Power Point overview titled “ <i>Substance Use and the Impacts on the Health of our County &amp; Children.</i> ” Dr. Van Scoy’s presentation began with background on the numbers of annual admissions to the NICU: 250-290. He noted the lack of good data on substance use and the scope of the problem because of the unreliable data from self-reporting, increasing/decreasing use in pregnancy and no universal drug screening. His presentation listed the substances of use/abuse and talked about the effects from these: alcohol (leading cause of substance-induced birth defects), tobacco, stimulants, anti-anxiety/depressants, opiates (with the largest prescribers of opiates being primary care physicians and dentists – partly driven by consumer culture and the expectation of no pain). 9-40% of pregnant women are prescribed opiates. In the NICU, Dr. Van Scoy deals with Neonatal Abstinence Syndrome (NAS), a syndrome that occurs with acute withdrawal of narcotics, noting that the numbers of newborns diagnosed with NAS has escalated over the past 5-7 years, with some of these newborns in the hospital for an average of 20-35 days. He talked about the costs to society and the specific risks to the infants and children that come through this, including erratic lifestyles, neglect, birth defects, need for pediatric specialty care, need for behavioral intervention, & special education. He explained how this impacts society as a whole. He suggested ways to address this through a “coming together” of society, physicians, multi-media and examining the role of suboxone/subutex in opiate withdrawal, rather than Methadone.  <b>Commissioner Kington-Barker</b> asked if suboxone has been approved for use on pregnant women. ( <i>Dr. Van Scoy and Dr. Georghiou are unaware of FDA approval yet, but it is currently being studied.</i> ) <b>Commissioner Campbell</b> referred to Dr. Van Scoy’s presentation noting that Neonatal Abstinence Syndrome can show up in as many as five days and asked if some babies are going home undetected. ( <i>Dr.</i>		

	<p><i>Van Scoy explained that it is very probable. Some institutions across the country will not allow a baby to be discharged before 5 days of age if the mother is on methadone. Commissioner Campbell asked if the baby's health would be threatened. (Dr. Van Scoy explained that the baby would be very irritable and impossible to console. That, added to a parent who is already stressed, increases the chance of non-accidental trauma or child abuse.)</i></p> <p><b>Commissioner Grantham</b> asked if there were statistics showing these children are more prone to becoming addicted to a drug if they are reintroduced to the drug later. <i>(Dr. Van Scoy not aware of any studies showing they are more or less prone if reintroduced.)</i></p> <p><b>Commissioner Enns</b> noted that incidence has become greater over the last 3-4 years and asked if this is because reporting has increased or people are using more. <i>(Dr. Van Scoy believes it is a combination of the two, but incidence of use within the community is increasing in general; it has become more accepted that someone is taking opiates on a chronic basis.)</i></p> <p><b>Commissioner Warren</b> referred to the 4 P'S screening tool and asked if obstetricians are doing screenings, brief intervention and referrals treatment. <i>(Dr. Van Scoy advised that screening tools are used, but this is an area where it is difficult to obtain good data because it is "self-reported" which can be underreported &amp; unreliable.)</i></p> <p><b>Commissioner Warren</b> commented that many winetasting events include activities for children. She suggested working with the Vintners Association to get them to agree on making these events adult only.</p> <p><b>Commissioner Kington-Barker</b> referred to Dr. Van Scoy's presentation stating that 9-40% of pregnant women are receiving opiates and asked who is prescribing to them. <i>(Dr. Van Scoy explained that there are certain conditions where the patient's OB will prescribe. They are also prescribed in ERs and primary care offices.)</i></p> <p><b>Commissioner Kington-Barker</b> reiterated Dr. Van Scoy's message that it would be nice to have a "coming together" of all of the different specialties and involve all providers in the conversation. <i>(Dr. Van Scoy noted that across the country there are more inclusive conferences occurring.)</i></p> <p><b>Dr. Nisha Abdul Cader, Medical Director, Suspected Abuse Response Team / Martha's Place Children's Assessment Center / Juvenile Services Center (JSC)</b>, presented a Power Point overview titled "Pediatric Issues in Community Substance Abuse." The presentation talked about and provided findings from the "ACE (Adverse Childhood Experience) Study." The ACE Study showed the more categories of trauma experienced in childhood, the greater the likelihood of experiencing alcoholism, illicit drug use, suicide attempts, &amp; intimate partner violence later in life, affecting physical, mental, social and economic health. Dr. Abdul Cader talked about what they are doing in the community to work on these areas through Martha's Place Children's Assessment Center where they provide assessments and treatments for children who exhibit high risk behavior or have been prenatally exposed to drugs &amp; alcohol. In 2013, they had 250 referrals. 80-90% of these children have some kind of prenatal substance exposure including tobacco, methamphetamine &amp; opiates. The results show many of these children have learning disabilities. In 2013-14, the Suspected Abuse Response Team (SART) Program saw 30 sexual abuse cases, 20 physical abuse cases and 21 drug endangered children. The average census at the Juvenile Services Center is 30 minors, 75% with substance use (alcohol, TCH, opiates, methamphetamine, spice) and the majority with co-occurring disorders, many on psychotropic medications.</p> <p><b>Commissioner Kington-Barker</b> asked if many of the adolescents at JSC were on medications for</p>	
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	<p>Attention-Deficit/Hyperactivity Disorder (ADHD). <i>(Dr. Abdul Cader answered yes, and that the emotional dysregulation for those children under stress response can be what is causing the ADHD behavior. It gets difficult when psychologists try to balance a stimulant medication with something that is also helping with anxiety.)</i></p> <p><b>Commissioner Warren</b> asked if the ACE studies have shown any cause &amp; effect related to the homeless population and chronic illness. <i>(Dr. Abdul Cader is uncertain about studies specific to the homeless population, but noted that there is a lot of information and articles that have come out of the ACE studies.)</i></p> <p><b>Paul Georghiou, MD, FACEP</b>, provided a Power Point “snapshot” view as an ER physician about what is happening in the community with regards to substance abuse. Dr. Georghiou shared photos of clients presenting with methamphetamine abuse, injuries from intoxication, severe crush injuries after passing out from heroin, suicide attempt with evidence of opium withdrawal, liver failure from long term alcohol abuse, contusion from a seizure brought on from “spice,” a battered child by a methamphetamine user. He talked about the direct toxic effects of substance related illnesses, the medical complications, treatment of complications caused by substance abuse, and the fact that we are not addressing the underlying substance abuse related to these injuries. He emphasized the costs to society, injuries to the innocent and the toll on physicians. Dr. Georghiou closed his presentation by talking about positive things that have happened over the years with smoking cessation, second hand smoke protection, drug &amp; alcohol education programs, DUI enforcement and the fact that all of these are health initiatives have been driven by health commissioners, Health Officers and legislators and the fact that we all can make a difference.</p> <p><b>Commissioner Clous</b> asked if there is a correlation between what they are seeing in the ERs and there being a university in San Luis Obispo. <i>(Dr. Georghiou answered that there are certain events that lead to riskier behavior, where they may see an increase, but it is not unique to SLO. Universities are starting to really examine these issues and are cracking down on alcohol abuse on campus and in particular, the issues of sexual assault, which is very challenging to deal with in the ER.)</i></p> <p><b>Commissioner Kington-Barker</b> asked if ERs have seen an increase in persons “drug seeking” in the ERs. <i>(Dr. Georghiou answered that this practice has been in part driven legislatively, where pain must be treated aggressively by prescribing enough pain medication, or you could be sanctioned. But the “Cures Program” is a huge step forward, where you can log in a patient’s name and find every opiate prescription issued to them in California.)</i></p> <p><b>Commissioner Kington-Barker</b> commented on the excellent presentations and the fact that issues of substance abuse go across all socio-economic strata &amp; age groups.</p>		
<p><b>5. Health Agency / Public Health Report</b></p>	<p><b>Penny Borenstein, MD, Health Officer</b>, reported on the following:</p> <ul style="list-style-type: none"> <li>• <b>Maternal, Child and Adolescent Health (MCAH) Program:</b> Every five years the MCAH program is required by the State to do a needs assessment to receive federal funding through the Title 5 Maternal &amp; Child Health Block Grant. Public Health is in the preparatory year for a new five year cycle that will start next July. The fifth year of the current plan has one component that focuses on perinatal substance use. They are required in this needs assessment to base it on actual data from our community. Public Health continues to do the 4 P’s Plus Program, with physicians who are responsible for about half of the pregnancies in our county using this perinatal substance abuse screening tool.</li> </ul>		

	<ul style="list-style-type: none"> <li>• <b>Affordable Care Act (ACA) Presentation:</b> The Health Agency will be providing an update to the Board of Supervisors on the ACA and how it has impacted programs within the Health Agency on Tuesday, Sept. 16.</li> <li>• <b>Ebola:</b> While the risk of Ebola reaching SLO County is low, Public Health continues to take steps to prepare. Dr. Borenstein has been in communication with the hospitals about readiness &amp; ability to care for patients, and Public Health continues to disseminate health alerts &amp; information to providers. The PH Lab Director has been working with all of the hospital lab directors about specimen collection and shipment to the CDC. EMS dispatch has added a protocol to query for specific travel history for symptom-appropriate calls.</li> </ul>		
<b>6. Health Commissioner Updates</b>	<p><b>Chair Enns:</b> Attended the Suspected Abuse Response Team (SART) Advisory Board. Dr. Abdul Cader spoke as part of the presentation tonight.</p> <p><b>Commissioner Pope:</b> No report.</p> <p><b>Commissioner Clous:</b> Reported that Janice Campbell from the Agriculture Department arranged for Commissioners Clous and Smith-Cooke to take a field trip of the agricultural community in South County and the City of San Luis Obispo with two of their inspectors. The ride-along was very beneficial in terms of learning more about the type of crops in our County, trainings that are done, and the commitment of the inspectors. They wrote a letter to the Agricultural Commissioner thanking them for the opportunity.</p> <p><b>Commissioner Raymond:</b> Attended the Adult Services Policy Council last Friday where there were three presentations: 1) Senior Safety by SLO City Fire Department; 2) Suzan Ehdaie from SLO County Housing &amp; Economic Development who talked about the housing needs assessment survey they are doing as part of their strategic plan. The survey is available online and there are also two upcoming public engagement dates – Sept. 11, 5-6p, Atascadero City Hall and Sept. 17, 5-6p, Arroyo Grande City Hall; and 3) Betsy Umhofer of Lois Capps’ Office who talked about the formula pay for physicians in the County. Because we are designated a rural community, reimbursement to physicians is low. They are hopeful within the near future that there will be a new formula for physicians. In the meantime, there is a geographic cost index that provides a bit of fix.</p> <p><b>Commissioner Warren:</b> Advised that the Homeless Services Oversight Council (HSOC) recently completed a survey for their 50 Now Project. She suggested inviting Laurel Weir, Homeless Services Coordinator, to speak about the survey, as well as inviting Suzan Ehdaie to speak about the housing needs assessment.</p> <p><b>Commissioner Grantham:</b> No report.</p> <p><b>Commissioner Campbell:</b> No report.</p> <p><b>Commissioner Kington-Barker:</b> No report.</p> <p><b>Commissioner Sage:</b> No report.</p>		
<b>7. Committee Reports</b>	<p><b><u>Nominating Committee:</u></b></p> <p><b>Commissioner Sage</b> reported that the Nominating Committee met and is recommending Dr. Robert Campbell to fill the Consumer vacancy on the commission. Motion was made by Commissioner Pope to approve and forward the recommendation to the Board of Supervisors for their approval. Motion seconded by Commissioner Raymond. All in favor.</p>		
<b>8. Prospective Future Items</b>	<p><b><u>October 2014</u></b></p> <p>Joel Diringner – ACA</p> <p>Suzan Ehdaie, County Planner, Housing &amp; Development Economic Team</p>		

	<p>Laurel Weir, Homeless Services Coordinator</p> <p><b><u>Future topics:</u></b>  <b>Commissioner Pope</b> distributed a copy of an opinion he wrote based on his career experience that shared his concerns over the process of well stimulation using high pressure, toxic chemicals (sometimes hydrofluoric acid) and in some cases high volumes of waste or fresh water. Fracking is one subset of the high pressure well stimulation processes that may be used. He asked for discussion on this at a future meeting.</p>		
<b>9. Adjournment</b>	Meeting adjourned at 7:45 pm	<i>Adjournment</i>	<i>All</i>