

**COUNTY OF SAN LUIS OBISPO  
HEALTH COMMISSION**

Minutes of Meeting

Monday, June 12, 2017 (County Board of Supervisors Chambers)

Members Present: Mary Jean Sage (Chair), Jinah Byram, Kris Kington-Barker, Robert Campbell, David Clous, Scott Smith-Cooke, Candace Winstead

Members Absent: Claire Grantham, Jean Raymond, Tamar Sekayan, Susan Warren

Staff Present: Dr. Christy Mulkerin, Jean White

Speakers: Candace Winstead, Ph.D., Associate Professor, Cal Poly State University; David Kilburn, Executive Director, Access Support Network

Agenda Item	Discussion	Action	Who/When
<b>1. Call to Order</b>	Meeting called to order at 6:00 PM by Chair Sage.	<i>Call to Order</i>	<i>Chair Sage</i>
<b>2. Approval of Minutes</b>	Minutes of May 8, 2017 approved as drafted.	<i>May 8, 2017 minutes approved</i>	<i>All</i>
<b>3. Public Comment</b>	Chair Sage opened the floor to public comment with no response.		
<b>4. Presentation: CDPH HCV Demonstration Grant</b>	<p><b>Commissioner Winstead</b> introduced tonight’s presentation noting that Mr. Kilburn will be speaking about Hep C linkages to care and testing through the demonstration grant that the Access Support Network received from the State of California and that she will be providing background on Hep C.</p> <p><b>Candace Winstead, Ph.D., Biological Sciences Department, Cal Poly State University,</b> presented a Power Point titled “<i>Hepatitis C Virus (HCV) Background, Life cycle, Disease &amp; Epidemiology.</i>” She explained the three main types of viral hepatitis: Hep A (vaccine available), Hep B (vaccine available), and Hep C (no vaccine). HCV is the focus tonight and has a 90-95% cure rate, with a shorter duration of treatment than before. The most at risk population for HCV are people who inject drugs, are HIV positive, received blood transfusions before 1991, were ever incarcerated, babies born to HCV positive women, health care workers exposed to infected blood and the baby boomers. She provided statistics on HCV prevalence and mortality. In SLO County, the rates of newly reported cases appear to be more prevalent in rural areas and more prevalent in SLO County than the state as a whole. Chronic HCV rates appear to be stable in the county over the last several years, but higher than statewide rates.</p> <p><b>David Kilburn, Executive Director, Access Support Network San Luis Obispo &amp; Monterey Counties,</b> presented a Power Point overview of the project they are currently doing with Hep C linkage to care through a demonstration grant from the State of California. He provided background on the Access Support Network, noting that in 1999 they saw quite a few HIV clients who were also co-infected with Hep C. At that time, they were awarded a grant from the CA Endowment to start their Hep C project. In 2016, they had an opportunity through advocacy with the state for a three-year demonstration grant and are currently in their second year. Their target population is any person who has injected in the present or past and secondary are baby boomers. They have tested 342 people in SLO County through a rapid test, receiving results within 20 minutes that show antibodies for Hep C. Following that is an RNA test for the actual virus that requires a blood draw. Mr. Kilburn talked about the many barriers in the cascade of care – from identifying people, testing them, linking them to care, getting them into treatment and curing the virus – and the many points where people</p>	<i>Copies of the Power Point presentations are filed with the official record of the meeting.</i>	

can fall out of care and not move to the next step. This grant is to identify all of those barriers and try to find solutions to move people through and get them cured. One of the biggest barriers they have right now is not having an onsite phlebotomist at their testing sites. They are trying to educate people that treatments are very effective with minimal side effects. The County has been very supportive over the last 20 years in funding their program, so getting the demonstration grants and being able to sustain them over the years is quite remarkable. They have the support, they just need to put it all into action and raise awareness.

**Commissioner Sage** referred to a comment made that at times persons presenting at shelters appear to be under the influence when they actually have progressed in their disease and need medical treatment and asked what they do to provide education to shelter providers. *(Mr. Kilburn advised that they go out to the shelters to educate and explain what to look for when someone is presenting with advanced disease; they also educate the client to let the shelter know about their health issue and will provide advocacy for the patient in an appeal.)*

**Commissioner Campbell** asked about cost of drugs for treatment. *(Mr. Kilburn advised that treatment is still expensive, but the price is coming down. A duration of 12 weeks treatment at \$24,000 as opposed to end stage liver disease and transplantation upwards of \$700,000.)*

**Commissioner Campbell** asked about the amount of spread from persons who are antibody positive who do not get RNA testing, but have active disease and are still communicable. *(Mr. Kilburn advised of the risk and that this is the reason they try to get people connected, particularly the hard to reach populations. There is a push throughout the state to engage more communities to allow Syringe Exchange – a critical program to get people in care and get the supplies they need.)*

**Commissioner Winstead** noted it is her understanding that MediCal pays for full treatment. *(Mr. Kilburn answered that MediCal will pay, but there are eligibility/score factors.)*

**Commissioner Kington-Barker** asked if the map showing higher incidence in SLO County includes the prison population. *(The prison population is not included in those numbers. Mr. Kilburn added that when you have an active community in finding people with Hep C, numbers will look higher compared to a county that is not as active.)*

**Commissioner Kington-Barker** referred to deaths after the age of 55 and asked about correlation between the identification of Hep C and the continuance of substance abuse. *(Mr. Kilburn advised that Hep C is a slow progression disease that is different in everyone, with numerous factors.)*

**Commissioner Byram** noted the amount of time it takes from an initial physical with primary care provider, to referral to specialist, to starting treatment (up to six months), and asked if they provide education on infection control and using protection. *(Mr. Kilburn advised that they are working at the state level for primary care providers to be able to prescribe. They are also beginning a partnership with CHC, Oceano to have a PA do initial triage and not refer everyone to one specialist. They are pushing for expanded treatment, knowing every referral is a variable in the timeline for treatment.)*

**Commissioner Clous** asked what is being done to narrow the gap between initial diagnosis to follow up. *(Mr. Kilburn advised they are offering incentives to get tested, working to streamline process, trying to contract with a phlebotomist on site, but it is a challenge and that is what the*

	<p><i>demonstration grant is all about - to identify barriers. There are many challenges for the population they are trying to reach - shelter, food, &amp; drug addiction are all competing priorities in their lives.)</i></p> <p><b>Commissioner Smith-Cooke</b> asked how long it takes MediCal to approve payment. <i>(MediCal typically pays immediately for doctor visits. One of the biggest barriers is in getting people to the lab. Having an on-site phlebotomist that would go to them would be helpful.)</i></p> <p><b>Commissioner Smith-Cooke</b> asked if persons should be asking their doctors to be tested. <i>(Mr. Kilburn commented that there is a lot of education that still needs to happen. Doctors often have their own perception of who is at risk. Access Support Network offers free testing.)</i></p> <p><b>Commissioner Smith-Cooke</b> asked what would be on their wish list if the Board of Supervisors could help. <i>(Their wish is to keep the momentum up and eliminate Hep C from our county.)</i></p> <p><b>Commissioner Sage</b> asked what the barriers are in contracting with a phlebotomist. <i>(Mr. Kilburn explained the unusual hours and that many county phlebotomists are not looking for “side work.” Becoming a phlebotomist requires completing a 12-week course and intense active testing. It is also expensive.)</i></p> <p><b>Commissioner Byram</b> commented on the number of barriers to treatment, including patients with drug addictions, mental health issues, patients not showing up for appointments or lab work, few specialists with appointments booked out for several months. <i>(Mr. Kilburn acknowledged all of the above and the importance of their partnerships with their clients to let them know the importance of keeping appointments.)</i></p> <p><b>Commissioner Sage</b> commented that it would be helpful for primary care to help with treatment. She works with another county whose FQHC primary care is treating Hep C.</p>		
<p><b>5. Health Agency/Public Health Report</b></p>	<p><b>Dr. Christy Mulkerin, Deputy Health Officer</b>, reported on the following:</p> <ul style="list-style-type: none"> <li>• <b>Norovirus:</b> There have been some outbreaks of Norovirus in Santa Barbara County, which is highly contagious in any congregate setting, but no outbreaks in SLO County.</li> <li>• <b>Salmonella Infection:</b> The Centers for Disease Control is reporting higher incidence of salmonella linked with backyard chickens. There is one known salmonella case in SLO County that is specifically from a backyard chicken and they suspect the number of cases is higher. Public Health will be doing an educational campaign.</li> <li>• <b>Valley Fever/Cocci:</b> They are still seeing an increase in Valley Fever. Dr. Mulkerin will bring back numbers of cases/deaths to the next meeting and how they compare to last year. Most deaths have been associated with immunocompromised individuals, but the combination of the rain and drying out of the soil w/winds are causing an increase in number.</li> <li>• <b>Recognition of Commissioner Scott Smith-Cooke:</b> Dr. Mulkerin presented a “Certificate of Appreciation” to Commissioner Smith-Cooke, on behalf of the Health Agency and the County Board of Supervisors, thanking him for his 5 years of service on the Health Commission.</li> </ul>		
<p><b>6. Health Commissioner Updates</b></p>	<p><b>Commissioner Smith-Cooke</b> attended the Oral Health Coalition meeting on June 6<sup>th</sup> and reported from the meeting that the amount of the LDPP grant from the State is still unknown because the State has requested additional information. The free dental day clinic in Templeton was a huge success and served many people in one day. This will occur again next year. They also wrapped up the school year by going into the elementary schools and checking student’s teeth. Commissioner</p>		

	<p>Smith-Cooke commended the Cal Poly Dental Club for their hands on efforts in working with 280 students on brushing and flossing, showing excellent results.</p> <p><b>Commissioner Winstead</b> added to Commissioner Smith-Cooke’s report that she is the advisor to the Pre-Dental Club at Cal Poly and that they received the Club of the Year Award from the College of Science and Math because they are so active in the community.</p> <p><b>Commissioner Clous</b> commented on a Wall Street Journal article showing a disturbing trend that tobacco profits are soaring and that Americans spend more money on cigarettes today than money on beer and soda combined.</p> <p><b>Chair Sage</b> commented that she has a couple of projects that the commission may want to become involved in related to the Tobacco Control Coalition that she will bring up at the planning meeting next month.</p> <p><b>Commissioner Winstead</b> attended the Opioid Safety Coalition in May where there was a presentation from the medical director of Aegis Treatment Center about access to medication assisted therapy for persons with substance or opioid use disorder, particularly about reducing the stigma around addiction and increasing the availability of medication assisted treatment. Also, at the meeting there was discussion about the new grant that will be beginning in July, a smaller grant, but they hope to continue with safe prescribing practices and education and expanding access to medication assisted treatment. The next meeting of the Coalition is in September.</p> <p><b>Commissioner Campbell</b> updated the commission on the Oceano Dunes that the APCD sent a warning letter to State Parks about their recurring violation. State Parks has 30 days to respond. The first phase of the modeling project is complete and a report will be presented to the APCD Board at next week’s meeting.</p> <p><b>Chair Sage</b> reported that the Healthy Communities Workgroup continues to meet on the first Thursday of every month and is getting more active in reviewing plans for cities. One upcoming project is the proposed quarry in Santa Margarita.</p> <p><b>Chair Sage</b> reported that the Board of Supervisors will be reviewing recommendations and awarding the Preventive Health/Community-Based Organization grants at the budget hearings on Wednesday this week.</p>		
<b>7. Committee Reports</b>	<p><b>Commissioner Campbell made a motion to approve the recommendation from the Nominating Committee for FY 2017-18 slate of officers: Chair – Mary Jean Sage; Vice-Chair – Kris Kington-Barker; Secretary – Jean Raymond. Motion seconded by Commissioner Winstead and approved by all present (Commissioners Byram, Kington-Barker, Campbell, Clous, Smith-Cooke, Winstead, Sage).</b></p>	<i>FY 2017-18 slate of officers approved.</i>	<i>All present</i>
<b>8. Prospective Future Items</b>	<p><b>July 10, 2017</b> Retreat/Planning Meeting Location: SLO Public Health Department.</p>		
<b>9. Adjournment</b>	<p>Chair Sage thanked Commissioner Smith-Cooke for his service on the commission. Meeting adjourned at 7:20 PM.</p>	<i>Adjournment</i>	<i>All</i>