



HEALTH SERVICES ADVISORY BOARD

County of San Diego - Health & Human Services Agency



MEMBERS:

APPOINTED BY BOARD OF SUPERVISORS

District 1

Karrar Ali, DO, MPH
Suzanne Afflalo, MD

District 2

Judith Shaplin
LaVonna Connelly

District 3

Harris Gregory Effron, MD
Vacant

District 4

James Lepanto, MFT | **HSAB Chair**
Shawn Amirhoushmand, LNHA, RCFE

District 5

Vacant
Vacant

COMMUNITY REPRESENTATIVES

San Diego County Medical Society

Paul Hegyi, MBA
Jennipher Ohmstede | Alternate

Hospital Association of San Diego & Imperial Counties

Dimitrios Alexiou, FACHE
Judith Yates | Alternate

Health Center Partners of Southern CA

Henry Tuttle
Tim Fraser | Alternate

Consumer Center for Health Education & Advocacy, Legal Aid Society of San Diego

Gregory Knoll, ESQ
Jack Dailey | Alternate

Behavioral Health Advisory Board

Mike Matthews
Jenifer Mendel | Alternate

Healthy San Diego Professional Advisory Board

Leonard Kornreich, MD
Harriet Seldin, DMD, MBA | Alternate

Healthy San Diego Consumer Advisory Board

Vacant

VISION:

An Advisory Board that the County Supervisors rely on for expertise to improve the health and wellness of the San Diego population.

MISSION:

Provide the Board of Supervisors expert and timely advice to advance an integrated health and wellness system, where everyone has access to affordable, comprehensive and quality care.

GUIDING PRINCIPLES:

- Everyone has access to affordable care .
- Care is coordinated, responsive and culturally sensitive .
- Services are integrated, seamless and comprehensive.
- Wellness of mind, body and spirit is pursued for every resident.

The Health Services Advisory Board (HSAB) is a citizens advisory board on public health, as required by County Charter.

LONG-TERM GOALS:

Goal 1 // Enhance HSAB's value to the County Board of Supervisors

Goal 2 // Advance the value of a holistic integration of public health, primary care, behavioral health and social support services.

Goal 3 // Solicit community input for the design of solutions.

Goal 4 // Monitor and provide advice for budget, legislative, policy and program changes.

DUTIES & RESPONSIBILITIES Excerpted from SD County Administrative Code:

- Make recommendations on new policies and programs.
- Review HHS budget.
- Examine variables which impact access to health care and develop an integrated set of recommendations aimed at an improved health-care delivery system.
- Review legislation and make recommendations to the Board of Supervisors and HHS Director.
- Solicit and provide a forum for public input, advice and proposed solutions.
- Assist HHS Director in assessing community issues which could result in a fiscal impact on County government and make recommendations regarding such impacts.

GOAL 1 // Enhance HSAB's value to the County Board of Supervisors.

OBJECTIVES

1. Maintain an active, engaged and representative HSAB.
2. Convey community needs and priorities to the County Board of Supervisors (BOS).

ACTIONS

1. Meet with respective Supervisor's office at least twice per year.
2. Identify BOS priorities to facilitate stronger communication between the Supervisors and HSAB.

GOAL 2 // Advance the value of a holistic integration of public health, primary care, behavioral health and social support services.

OBJECTIVES

1. Promote understanding of the socio-economic determinants of health (policymaking, social factors, health services, individual behavior and biology or genetics) and advocate for strategies that make it easier for residents to be healthy.
2. Increase community awareness about the impact of mental health, alcohol and other substance abuse disorders in order to change the way people approach and talk about these issues.
3. Examine innovative approaches for improving access to housing and other support services that are essential to good health.

ACTIONS

1. Identify gaps in integrated care, based on expertise of HSAB members and current research, and make appropriate recommendations for the integration of primary care, behavioral health and social support services.
2. Analyze data related to priority areas identified by HSAB.
3. Seek ways to coordinate agendas with other advisory boards in order to bring a multi-disciplinary approach to issues.

GOAL 3 // Solicit community input for the design of solutions.

OBJECTIVES

1. Solicit input from the public and stakeholders on emerging wellness and health service issues.
2. Facilitate dialogue between health providers in the region.
3. Collect and share information on best practices.
4. Work with planning agencies, researchers and policy makers to promote health and well-being of San Diego communities.

ACTIONS

1. Convene at least one community forum annually.
2. Provide updates from health care provider coalitions and advisory boards to inform recommendations.
3. Conduct at least one site visit each year and disseminate information about what is learned.
4. Solicit the latest findings from planning agencies, researches and policy makers to inform recommendations.

GOAL 4 // Monitoring and provide advice for budget, legislative, policy and program changes to perform.

OBJECTIVES

1. Review current and proposed healthcare legislation annually.
2. Monitor the status of access, affordability, coordinated care and integration of health services in San Diego County and its communities.
3. Identify impact of new healthcare policies as a result of the Affordable Care Act.
4. Offer ideas and insights regarding accountable care communities.

ACTIONS

1. Establish committees around key focus areas or issues in order to collect information, develop alternatives, and propose solutions to inform decision-making.
2. Produce an annual report for the Director of HHSA and the County Board of Supervisors which summarizes findings and recommendations in issues presented to the HSAB, pursuant to Section 861.9 of the San Diego Code of Administrative Ordinances.
3. Request updates on any new policies related to the Affordable Care Act.
4. Request updates on activities related to the implementation of the San Diego Concept of the Accountable care community.

NAME: HEALTH SERVICES ADVISORY BOARD (HSAB)

LEGAL AUTHORITY: County Charter Section 710; County Administrative Code, Article LIV, commencing with Section 861.1 as amended by Ordinance 8123 (NS), 8/4/92 (33); Ordinance 8509 (NS), 3/7/95 (40); Ordinance 8910 (NS), 5/19/98 (33); Ordinance 9070 (NS), 8/10/99 (37); Ordinance 9894 (NS), 11/06/07 (3); Ordinance 10371 (NS), 1/27/15 (5); Ordinance 10438 (NS), 9/13/16 (15).

MEMBERS

APPOINTED BY: Board of Supervisors

MEMBERSHIP

COMPOSITION:

The Board shall consist of seventeen (17) members. All members shall represent the entire area and population of the County in the performance of duties. Persons appointed to the Board shall have demonstrated interest and experience in the needs of the Health and Human Services Agency. The members shall serve during their terms at the pleasure of the Board of Supervisors and any member may be removed at any time by a majority vote of the Board of Supervisors or by the member's failure to meet the regularly scheduled meeting attendance requirements. All members shall be voting members of the Board; provided, however, that each member may designate an alternate in writing, and the alternate shall be entitled to vote on Board matters in the absence of the member.

Each member of the Board of Supervisors shall nominate and recommend for appointment by the Board of Supervisors two (2) members to the Board from the following categories:

Physicians:

Representing traditional health care providers serving low income and indigent populations, each physician to be affiliated with one or more minority health care provider organizations in San Diego County;

Representatives:

- Of academic institutions active in the training and education of health professionals in San Diego County;
- Of business, recommended by the San Diego Regional Chamber of Commerce and other Chambers of

- Members of the County citizen advisory committees shall disclose to the Clerk of the Board of Supervisors in writing any outside employment or activity engaged in for compensation which relates to their County duties or to the functions and responsibilities of the County department or agency which they serve or which may be subject to approval by any County officer or employee.
- No member of an advisory committee shall make, participate in making or in any way attempt to use his position as a member of an advisory committee to influence a decision in which he knows or has reason to know that he has a financial interest, except in those cases where the member is appointed to represent an entity or group having a financial interest in a matter coming within the citizen committee's area of responsibility.
- No person shall be appointed to or serve on, an advisory committee which participates in the making of County contracts in which such person is financially interested within the terms of Government Code section 1090 et seq. This prohibition is not applicable to persons with "remote interests" as defined in subdivision (b) of Government Code section 1091, provided that the person discloses the interest in accordance with subdivision (a) of Government Code section 1091 and the person does not influence or attempt to influence other advisory committee members to act favorably in respect to the contract in which the person has a remote interest.

TERMS:

Members nominated by a Supervisor shall serve a term of office concurrent with the term of office of their nominating Supervisor. The terms shall expire on the date of expiration of the term of the nominating member of the Board of Supervisors or at such time as said member of the Board of Supervisors ceases to hold office, whichever first occurs.

The reelection of a member of the Board of Supervisors for a succeeding term shall not automatically extend the term of any board member.

The persons, if any, who are members of the Health Services Advisory Board because they hold one of the

bring discipline and coordination to a fragmented health care system.

4. To review current and proposed health related legislation and recommend support, opposition or propose change to the Board of Supervisors, and the Director of the Health and Human Services Agency to pursue further action through appropriate legislative channels.
5. To solicit and provide a forum for public input, advice, and proposed solutions and alternatives on critical health issues and problems in the community and faced by the County government.
6. To serve as the designated nominating authority for membership on designated Advisory Committees and forward these nominations to the Board of Supervisors for appointment.
7. To assist the Director of the Health and Human Services Agency in assessing those community issues which could result in a fiscal impact on the County government and making recommendations regarding such impacts.
8. To perform such other duties as may be assigned by the Board of Supervisors.

**MEETING DATE
AND LOCATION:**

First Tuesday of each month 3-5 p.m.
County Administration Building
1600 Pacific Highway, Room 302/303
San Diego, CA 92101

COMPENSATION:

Members of the Board shall serve without compensation. Board members shall be reimbursed for expenses incurred in performing their duties under this Article, including mileage reimbursement in accordance with applicable Administrative Code provisions.

CONTACT PERSON:

Nora Bota
Health & Human Services
Mail Stop: P – 578
619-542-4120

REVISED: October 4, 2018

**Health and Human Services Agency
 Health Services Advisory Board (HSAB)
 January 8, 2019 *3PM–5PM* 1600 Pacific Highway, San Diego, CA**

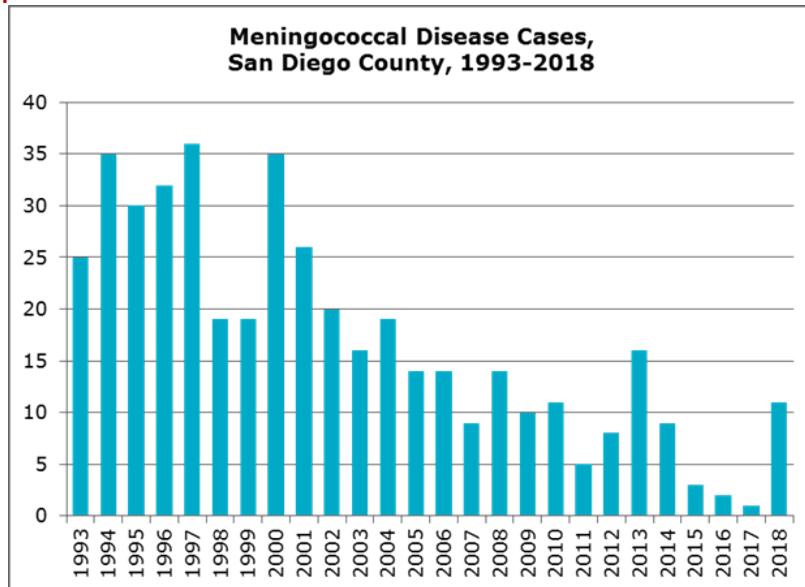
Public Health Officer's Report

I. Communicable Disease Issues

A. Infectious Disease Issues

1. Meningococcal Disease Outbreak (CAHAN sent on September 28, 2018)

- San Diego State University (SDSU) undergraduate students diagnosed with serogroup B invasive meningococcal disease (IMD).
- A meningococcal outbreak declared on campus on 9/28/18, because this is the 3rd case in just over three months (late June, September 3, and September 25).
- Close contacts with the new case have been identified and provided antibiotics. There is no need for antibiotics for those who were not in direct contact with the student.
- The local health officer is recommending that all unimmunized SDSU undergraduate students 23 years of age and younger get vaccinated with one of two available meningococcal B vaccines.
- Serogroup B has been found in 36% of cases since 2008 and accounts for six of the ten cases reported in 2018. Serogroup B has been the cause of 11 U.S. university/college outbreaks since 2008, including two others in California: one at the University of California Santa Barbara, in 2013, and one at Santa Clara University, in 2016.
- **In 2018, eleven meningococcal disease cases were reported in San Diego County, the highest number reported since 2013.**
- **No new meningococcal cases have occurred at SDSU since the last case with onset of symptoms on September 25, 2018.**
- **The County is collaborating with and supporting SDSU in a response to this outbreak.**
- **SDSU is continuing their campaign to get students to bring in their vaccination records if they have been vaccinated out of San Diego County for Meningococcal B. SDSU is also continuing their second dose campaign.**
- **SDSU students are returning to campus and some new on-campus students will arrive as well who will be offered vaccine. The County and SDSU plan to do at least one mass vaccine clinic this semester in addition to ongoing opportunities.**



Prepared by County of San Diego, Health and Human Services Agency,
 Public Health Services, Epidemiology and Immunization Services Branch, 1/4/2019

2. Zika Virus (Reported on **1/4/19 for local cases through 12/31/18**). This is the last final monthly report as
 - **No new San Diego Zika cases since the previous report.**
 - **The Centers for Disease Control and Prevention (CDC) reported 6 new Zika cases in the US states and no new cases in US territories in the last month.**
 - **California Department of Public Health reported 6 new cases in CA in the last month.**
 - **In the last month, 118 new Zika cases were reported in Mexico with illness onset in 2018.**
 - Total Zika Testing referrals to EPI Program for consultation of potential cases: **4,836 referrals**
 - Cases Ruled out: **4,666**
 - Confirmed Zika cases: 112
 - Total travel related cases: 106
 - Sexual transmission: 2
 - Congenital infection: 4

II. Board Actions

- A. Getting to Zero – Annual report via Board Memo issued on June 26, 2018 to coincide with National HIV Testing Day.
- B. Hepatitis A Outbreak
 - San Diego County declared a local health emergency, which was signed on Sept 1, 2017. It declares that the “spread of Hepatitis A in San Diego is a threat to public health” and “a local health emergency is declared in San Diego County.”
 - September 6 & 12, 2017: Ratify declaration of local health emergency: Hepatitis A Outbreak
 - September 26, 2017, October 10, 2017, October 24, 2017, November 6, 2017, November 14, 2017, November 27, 2017, December 5, 2017, December 19, 2017, January 2, 2018, and January 9, 2018: Continue local health emergency.
 - San Diego County Board of Supervisors motion to end local health emergency on January 23, 2018.
 - After Action Report issued May 10, 2018.
 - Grand Jury Report issued May 18, 2018 and responses went to Board of Supervisors the morning of Aug 7, 2018.

III. Public Health Issues

- A. West Nile Virus Zika Season: Department of Environmental Health issued Media Advisory on April 2, 2018 to notify the public of the start of mosquito season.
- B. National Public Health Week, April 2-8, 2018, with *Live Well San Diego* Public Health Champion Awards Ceremony on Friday, April 6, 2018.
- C. CAHAN released on February 16, 2018: Pertussis Increasing in San Diego.
- D. August is Immunization Awareness Month.
- E. September is National Preparedness Month. <https://www.ready.gov/september>
- F. CAHANs released on 8/31/18 (Hepatitis A Vaccination Reminder for Healthcare Providers), 9/14/18 (Fentanyl Overdoses Related to Illicit Drug Use), and 9/28/18 (Meningococcal Outbreak).
- G. San Diego County Hepatitis A Outbreak declared over on 10/19/18 after 100 days with no new cases reported.

IV. Grants

- A. **New Applications**
 1. Maternal Child and Family Health Services (MCFHS) submitted two new grant applications and were notified of award status:
 - a. **CDC-RFA-DP18-1817:** (\$900,000 per year for 5 years) Diabetes and Heart Disease & Stroke Prevent Programs-Innovative State and Local Public Health Strategies to Prevent and Manage Diabetes and Heart Disease and Stroke: This will provide funding for similar strategies that were in Component 1, Diabetes Prevention Program, and Component 2. The application was submitted on July 9, 2018. Notification of the award will occur on September 29, 2018. The County was awarded funding from the CDC for Category B for Heart Disease and Stroke, which will be effective September 30, 2018. MCFHS sent the final budget and work plan to the CDC for approval on October 31, 2018.
 - b. **CDC-RFA-DP18-1813: REACH Grant:** (\$792,000 per year for 5 years) This will provide funding for similar strategies that were in Component 1, strategies 1-4 of the previous Prevention funding. This also has two additions for a tobacco cessation strategy and community linkages. The application was submitted on July 16, 2018. Notification of the award will occur on September 29, 2018. The County was awarded funding from the CDC, which will be effective September 30, 2018. **MCFHS sent the final budget and work plan to the CDC for approval on November 15, 2018.**

c. Local Food Promotion Program Grant:

- MCFHS submitted an application for the United States Department of Agriculture (USDA) Local Food Promotion Program grant on May 7, 2018 for \$498,264 with a match of \$248,850. Funding was not awarded.

2. Kresge Emerging Leaders in Public Health Grant:

- PHS was accepted into the third cohort of the Kresge Foundation's Emerging Leaders in Public Health program. In addition to the \$125,000 in grant funding, PHS' leadership will receive leadership development trainings and technical assistance to help implement their proposed transformative concept – convening municipal governments and local stakeholders to tackle public health problems affecting the entire region.
- This new role builds off of the collaboration between city governments and the County to manage sanitation efforts during the hepatitis A outbreak.
- Dr. Wooten and Dr. Thihalolipavan attended the first of three required in-person meetings on August 6-8, 2018.

B. Funding

1. **Gonorrhea Surveillance:** California Department of Public Health is applying for a CDC grant. HSHB submitted an application specific to San Diego County. Funds are gonorrhea surveillance and to support lab testing in identifying ways to eliminate the disease. Start date is August 1, 2017; Application was submitted on May 15th; Amount is \$71,000. Award status pending.
2. **Naloxone Proposal** to participate in a naloxone distribution effort. Application submitted on May 1, 2017.
 - Approved, totaling \$248,300 (full amount).
 - First shipment of 5,372 naloxone doses was received on December 13, 2017 and second shipment of 1,248 naloxone doses was received on July 18, 2018.
 - A plan was developed and implemented.
 - **As of January 7, 2019, 6,476 doses** (100% of first shipment, **88% of second shipment, and 97.8% of total allocated supply for first and second**) doses were picked up by **28** agencies: San Diego County Medical Examiner (46 doses), Chula Vista Police Department (200 doses), A New PATH (2,160 doses), Fallbrook Unified High School District (2 doses), Interfaith Community Services (50 doses), Mira Costa College Police Department (18 doses), La Maestra Wellness Supportive Services (100 doses), SDSU PD (62 doses), North County Health Services (100 doses), SD Police Department (1,800 doses), All Peoples' Encinitas (**784 doses**), House of Metamorphosis (40 doses), Oceanside Police Department (30 doses), Union of Pan Asian Communities (4 doses), Heartland House (4 doses), Mountain Health and Community Services Inc (12 doses), Indian Health Council (150 doses), Escondido Police Department (80 doses), Vista Community Clinic (30 doses), Confidential Recovery (6 doses), McAlister Institute for Treatment & Education (60 doses), San Diego County Probation Department (200 doses), The Bishop's School (4 doses), La Mesa Police Department (76 doses), UCSD Preuss Charter (2 doses), Family Health Centers of San Diego (350 doses), **University of California, San Diego Police Department (40 doses), and San Diego Unified School District (66 doses). America's Finest Charter School is pending pick up of 4 doses.**
 - **There are 144 doses remaining to be distributed.**
 - The County executed **30** out of **31** potential naloxone MOAs/MOUs (two of which are MOUs).
 - There is another MOU with the County Department of Environmental Health, but not part of the grant.
3. **Hep A Funding:** CDPH funding \$350,000 to hire two Epidemiologists.
4. **Prevention** {Public Health Actions to Prevent Obesity, Diabetes, Heart Disease and Stroke}: funded to work in the City of San Diego geographic area
 - Components 1 & 2:
 - For implementing food sodium standards and environment and lifestyle changes (DPPs) – excited about the development of the Diabetes Prevention Programs
 - Diabetes prevention and community clinical linkages; health system interventions – Chronic Disease Surveillance via EHRs
 - This grant ended September 29, 2018 and was closed out as of December 31, 2018.
 - New CDC application are being prepared for submission in July 2018
5. **Local Oral Health Program (LOHP):** \$841,390/year for 5 years; Overall funding period is 1/1/18 to 6/30/22. Currently in the second year of funding that started 7/1/18. Funding from California Department of Public Health (Prop. 56).
6. **Zika Funding for PH Lab:** The State awarded PH Lab \$1,046,404 (June 2017 – June 2018). Scope of work includes following additional outcomes:
 - Add the Gene Sequencing Instrument
 - Establish agreement for Zika testing for binational/Baja/Mexico cases

- Establish agreement for Zika testing with Imperial County
7. **Zika Funding:** EISB was awarded \$413,793 for staffing support. Funding is for March 1, 2017-July 31, 2018.
 8. **Public Health Lab Microbiologist Training Funds:** \$75,500 was awarded to the lab to train 2 microbiologists.
 9. **Strategic HIV Prevention Projects,** funded by the state: PHS will receive \$1.8 million over the next two years (July 2017 through June 2019). There were only four awards, and San Diego County was the only health department that was funded. The other awardees include two community-based organizations (the LA LGBT Center and the San Francisco AIDS Foundation) and one federally qualified health center (AltaMed in LA/Orange County).
 - Proposal focused on a couple of core activities related to Getting to Zero:
 - PrEP education and navigation.
 - Rapid initiation of anti-retroviral therapy (ART) for individuals newly diagnosed with HIV.
 - Awareness Campaigns.
 10. **Tobacco Control Resource Program (TCRP)**
 - TCRP was notified on July 19, 2018 that the state will allocate \$2,805,276 in Tobacco funds (Prop 56 and Prop 99) for FY 17/18 and \$1,956,059 for FY 18/19. The County submitted paperwork on July 23, 2018 to the State to receive funding for quarter 1 and 2 of FY 18/19. The County received the quarter 1 and 2 Tobacco funds from the state on 9/25/18.
 - Additional Tobacco Funding \$182K one time only; pending funding from recent legislation (Prop 56).
 - TCRP staff members are working on the Budget revisions that are due on 10/4/18. Included in the changes will be: 1) revision of the FY 17-18 budget to reflect the actual expenses, 2) carrying over savings from FY 17-18 to FY 18-19, 3) reflecting staff vacancies and staffing at lower than budgeted FTE, and 4) increasing the FTE as directed for TCRP staffing. The revised budget and work plan were resubmitted to the state.
 11. **STD Funding:** The CDPH STD Control Branch {STDCB} received a \$5 million one-time increase in funding spendable in FY16-17, FY17-18, and FY18-19. Recently received \$427,649 of that amount.
 12. **SNAP-ED (Also known as NEOP (Nutrition Education and Obesity Prevention):**
 - Next 3-year cycle application and work plan due **March 15, 2019**; activities will continue to focus on policy, systems, and environmental change for nutrition and PA.
 - The next three-year grant cycle begins on October 1, 2019 and ends on September 30, 2022. The projected amount for the new three-year term is \$3,704,059 annually/\$11,112,177 cumulative with approximate additional funds of \$555,608 annually/\$1,666,827 cumulative, for a total projected amount of approximately \$12,779,004. MCFHS started the contract procurement process. **The County hosted an industry day on November 29, 2018 to gather input for the scope of work.**
 13. **Perinatal Equity Initiative:**
 - **The California Department of Public Health (CDPH) notified MCHFS of the allocation of \$448,047 (base of \$350,000 with an adjustment of \$98,047) for the Perinatal Equity Initiative planning grant to expand the scope of interventions to reduce infant mortality among African Americans.**
 - **The term of the grant is from December 1, 2018 to September 30, 2019. CDPH will release a Request for Applications in June 2019. The thirteen counties that received the planning grant will compete for this additional funding. It is expected that CDPH will select awardees by the end of September 2019.**

V. Public Health Initiatives

A. Major Initiative Updates and Highlights

1. Getting to Zero – Medical Advisory Committee: HIV, STD, and Hepatitis Branch (HSHB) has convened a Medical Advisory Committee consisting of healthcare professionals and executives from local healthcare systems and stakeholders to support Getting to Zero. The primary objectives of the committee are to increase routine HIV testing in healthcare settings and to optimize referral mechanisms for HIV linkage to care, pre-exposure prophylaxis, and post-exposure prophylaxis. Met with the Hospital Association of San Diego & Imperial Counties and community clinic networks on March 14, 2018; Met with San Diego County Medical Society on April 10, 2018; Met with Family Health Centers of San Diego on April 11, 2018. The “Getting to Zero” Board Memo went to the Board of Supervisors on June 26th. The Medical Advisory Committee met in June 2018. HSHB is working with the marketing company, MIG/MJE, to develop a “Getting to Zero” campaign to be launched at the end of November 2018. The PrEP San Diego campaign will be a component of the “Getting to Zero” campaign, which addresses three main pillars: Test, Treat, and Prevent. **The development of the expanded Getting to Zero (GTZ) marketing and media campaign has been completed. The press release and campaign launch occurred November 29, 2018, in conjunction with the Getting to Zero Summit. Speakers included Supervisor Roberts, Alberto Cortes (Mama’s Kitchen), Sayone Thihalolipavan, Patrick Loose and John Paul Hernandez (advocate). The GTZ Summit and campaign were covered by KPBS, KUSI and the County News Network.**

VI. Board Letter Forecast

DATE / BOARD LETTER	BOS MEETING	BRANCH	POC
January 2019			
1. Accept SNAP-Ed Grant Funds for the Nutrition Education and Obesity Prevention (Approved by HSAB on 9/4/18)	1/26/19	MCFHS	Dr. Coleman
February 2019			
2. Region VI Mutual Agreement (Scheduled for HSAB on February 5, 2019)	2/26/19	PHPR	Patrick Buttron
3. TB Elimination Initiative (Scheduled for HSAB on February 5, 2019)	3/12/19	TBRH	Dr. Graves
4. Procurement for Tuberculosis Adult Services Board Letter (Scheduled for HSAB on February 5, 2019)	3/12/19	TBRH	Dr. Graves
March 2019			
5. Title V Maternal and Child Health (MCH) Block Grant Board Letter (Scheduled for HSAB on March 6, 2019)	TBD	MCFHS	Dr. Coleman
6. Public Health Laboratory Authorization for Amendment of Contracts Board Letter (Scheduled for HSAB on March 6, 2019)	TBD	EISB	Jeff Johnson
May 2019			
7. HSHB funding Board Letter (Scheduled for HIV Planning Group)	5/21/19	HSHB	Patrick Loose
June 2019			
8. Accept Tuberculosis Funding from the State Board Letter – (Scheduled for June 2019)	6/25/19	TB	Dr. Graves
TBD			
9. Hansen's Disease Board Letter – (TBD 2019)			Medical Care Services Division

VII. Announcements

A. Personnel:

- New Hires: Deputy Director for Public Health Services (Dr. Anuj Bhatia), Department Finance Manager for Public Health Services (Romina Morris), Child Health and Disability Prevention Coordinator for MCFHS (Adrienne Yancey), and California Children's Services (CCS) Medical Director (Dr. Porchia Rich).**
- Departure – CCS Medical Director (Dr. Denise Green).**
- Temporary Assignments-Acting Agency Program and Operations Manager for MAA/TCM Program (Karen Ventimiglia).**

VIII. Site Visits/Audits

Timeframe	Description	Auditor
6/6/18 – 12/20/18	State audit of Hepatitis A outbreak. Requested by Assemblymember Todd Gloria. Audit report released on 12/20/18. The County will follow-up with the state within 60 days, 6 months, and one year.	State
11/14/18	Records Retention audit to review compliance with records retention schedule and County related policies. Final audit report is pending.	County of San Diego Auditor & Controller, contracted out to KNL Support Services (Rafael Parilla)

IX. Legislation

- Nothing currently to share.

X. Recognitions and Awards

- A. Public Health Services received three NaCO awards: 1) Hepatitis A Housing Program – Preventing the Spread; 2) Utilizing Foot Teams – Reaching the Unreachable During a Hepatitis A Outbreak; and 3) Vaccination Strategies – Engaging Hospital Emergency Departments as Vaccinators During a Hepatitis A Outbreak.
- B. Public Health Services received a California State Association of Counties (CSAC) Challenge Award in 2018 for the Hepatitis A Foot Teams.
- C. The County of San Diego received the National Association of County and City Health Officials (NACCHO) Promising Practice Award for Eat Well Practices.

Submitted by: Wilma J. Wooten, M.D., M.P.H., Public Health Officer and Director, January 8, 2019.