



County of San Diego
HEALTH SERVICES ADVISORY BOARD
1600 Pacific Highway, San Diego, CA 92101-2417

Tuesday, September 3, 2019
3:00pm to 5:00pm
1600 Pacific Highway Room 302/303, San Diego, CA

MEETING MINUTES

Members Present		Members Absent/Excused		Presenters	HHSA Support
Seat 6/Dist 3	Stuart Cohen	Seat 1/Dist	Vacant	Wilma J. Wooten,	Dr. Anuj Bhatia,
Seat 4/Dist 2	Lavonna Connelly	Seat 2/Dist 1	Suzanne Afflalo	M.D., M.P.H.,	Deputy Director
Seat 7/Dist 4	James Lepanto,	Seat 5/Dist 3	Harris Efron	Public Health	
Seat 12/Alt	Judith Yates	Seat 6/Dist 3 (Alt)	Frank Xu	Officer	Katrina Wyatt,
Seat 13/Alt	Tim Fraser	Seat 8/District 4	Geysil Arroyo		Administrative
Seat 14/CCHE	Gregory Knoll	Seat 9/Dist 5	Terese Cisneros-	Kristi L. Koenig,	Secretary III
Seat 15/BHAB	Michael Matthews		Remington	MD, FACEP, FIFEM,	
Seat 16/HSDPA	Leonard Kornreich	Seat 10/Dist 5	Marsha Bryan	FAEMS Medical	
Seat 19/Dist 3	Diana Aguirre	Seat 11/SDCMS	Paul Hegyi	Director,	
		Seat 11/(Alt)	Jennipher Ohmstede,	Emergency	
		Seat 12/HASDI	Alexiou Dimitrios	Medical Services	
		Seat 13/HCPSC	Henry Tuttle		
		Seat 14/Alt	Jack Dailey	Thomas Coleman,	
		Seat 15/Alt	Jenifer Mendel	MD, M.S., Medical	
		Seat 16/Alt	Harriet Seldin	Director, Public	
		Seat 3/Dist 2	Judith Shaplin	Health Services	
				Maternal, Child	
		Acronyms:	HASDI: Hospital	and Family Health	
		HSDPA: Healthy San	Association of San Diego	Services (MCFHS)	
		Diego Professional	and Imperial	Branch.	
		Advisory			

Members Present		Members Absent/Excused		Presenters	HHSA Support
		SDCMS: San Diego County Medical Society	CCHE: Consumer Center for Health Education		
		HCPCS: Health Center Partners of Southern California	BHAB: Behavioral Health Advisory Board		
			HSDCA: Healthy San Diego Advisory		

Minutes	Lead	Follow- up Actions	Due
Mar 5, 2019	James Lepanto	To extend an invitation to the new director of Integrated Services, Omar Passons. (Carried Over)	June 2019
May 7, 2019	James Lepanto	Distribute and carry forward White Paper regarding Senior Dental cares. (Carried Over)	June 2019
May 7, 2019	James Lepanto	The committee is to be provided with Counties Legislative Agenda. (Carried Over)	June 2019
May 7, 2019	James Lepanto	To extend an invitation to the new director of Behavioral Health, Luke Bergmann. (Carried over)	June 2019
May 7, 2019	James Lepanto	James to contact Paul Hegyi (Chair) o the Health Legislation to receive a summary of each bill and the resent to the Committee.	June 2019
May 7, 2019	James Lepanto	James to provide the committee with a link to assembly and senate bills that the sub-Committee would like the Committee to support	June 2019
May 7, 2019	James Lepanto	Annual report will be presented to the Committee. (Carried Over)	June 2019
May 7, 2019	James Lepanto	Forward and changes or updates regarding the White Paper directly to Dr. Bhatia.	May 2019
August 6, 2019	James Lepanto	To email the Strategic Plan to all members	August 2019
August 6, 2019	James Lepanto	To prepare a letter to the BOS recommending Oral Health Sub-Committees recommendation on STD and Oral Health.	August 2019

Next Meeting: HSAB Meeting: Tuesday October 1, 2019, 3:00 – 5:00 pm – 1600 Pacific Highway, Suite 302-303, San Diego, CA

Agenda Item	Discussion
I. Welcome & Introductions	James Lepanto called the meeting to order at 3:13 PM. The HSAB members and public in attendance were introduced.
II. Public Comment	No public comment.
III. Update/Presentation/Discussion/Follow-up Action items	A. Connecting City and County Governments to Promote Public Health: a Kresge Initiative of Public Health Services. Wilma Wooten, M.D., M.P.H., Public Health Officer/Director.

	<ol style="list-style-type: none"> 1. Wilma J. Wooten, M.D., M.P.H., Public Health Officer/Director of Public Health, provided an overall presentation for A Kresge Initiative. <ol style="list-style-type: none"> a. Background: <ol style="list-style-type: none"> 1) The Kresge Foundation is a U.S. philanthropic private foundation headquartered in Troy, Michigan. <ol style="list-style-type: none"> a) The foundation works to expand opportunities in America’s cities through grant-making an investing in: <ol style="list-style-type: none"> i. Arts and culture ii. Education iii. Environment iv. Health v. Human services, and Community development efforts b) Emerging Leader in Public Health (ELPH) Initiative c) Philanthropic organization focused on transformational change in communities d) Supports health departments as they adopt a new role e) Public Heal Services’ new role: <ol style="list-style-type: none"> i. Public Health Cross-Jurisdictional Strategist f) Roles & Functions <ol style="list-style-type: none"> i. Role: Public Health Services’ transformative role is to become a Cross-Jurisdictional Public Health Strategist. g) The AIM is to proactively and emergently engage the 19 jurisdictions of San Diego County as a trusted public health authority and leader. h) Functions are to: <ol style="list-style-type: none"> i. Build Capacity for the local health department and municipalities to establish clear enhanced rapid response, as needed. ii. Communicate with city jurisdiction on routine and emergent public health issues to enhance rapid response, as needed. iii. Develop coordinated relationships with city government departments, such as administration, planner, law enforcement, and housing to address routine and emergent public health concerns. i) Public Health Cross Jurisdictional Strategist j) Convene the various sectors of municipalities, starting with city planners from all 18 municipalities and the unincorporated areas over the next 6 months to address shared health concerns and emergency mangers to address public health threats. k) Use data and city priorities to identify focus areas l) Bring in experts, provide technical assistance, and share resources to address focus areas with a policy, systems, and environmental (PSE) approach m) Vision: <ol style="list-style-type: none"> i. To foster trusted and proactive relationships between City governments and the local health department. 	
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	<ul style="list-style-type: none"> n) Value of Transformative Role o) Local city governments will view the local health department as the “go-to”, trusted, and proactive partner to address public health matters. p) Goals of initiative <ul style="list-style-type: none"> i. Goal #1: Increase individual and team leadership and workforce development skills in the local public health department ii. Goal #2: Establish a bi-directional communication system for routine and urgent communication with city municipalities iii. Goal #3: Develop a process to coordinate and collaborate efforts between public health and city municipalities <p>b. Discussion (Q/A):</p> <ul style="list-style-type: none"> 1) What two cities are not part of <i>Live Well San Diego</i> Poway and Vista are currently not part of <i>Live Well San Diego</i>. 2) What are the prioritized needs of the city on regular living safety or living well priorities? City municipalities do not conduct health assessments by statute and by law. We have community assessment that a requirement for accreditation. 3) Who represent the unincorporated areas? The Board of Supervisors represents the unincorporated areas. <p>B. San Diego County Health CARES – Healthcare Initiative for Improved Domestic Violence (DV)/Strangulation Response and Prevention Wilma Wooten, M.D., M.P.H., Public Health Officer/Director and Kristi L. Koenig, MD, FACEP, FIFEM, FAEMS Medical Director, Emergency medical Services, Medical Care Services.</p> <ul style="list-style-type: none"> 1. Wilma J. Wooten, M.D., M.P.H., Public Health Officer/Director of Public Health, and Kristi L. Koenig, MD, FACEP, FIFEM, FAEMS Medical Director, Emergency medical Services, medical Care Services .provided an overall presentation for San Diego County Health CARES – Healthcare Initiative for Improved Domestic Violence (DV)/Strangulation Response and Prevention. <ul style="list-style-type: none"> a. Background: <ul style="list-style-type: none"> 1) Non-fatal strangulation is a strong indicator of future lethality in intimate partner relationships. 2) Healthcare staff have an important role in screening for intimate partner violence (IPV) and strangulation. 3) Referral for a Domestic Assault Forensic Examination (DAFE) can make a difference in the investigation and prosecution of these crimes. 4) 13% of domestic violence homicides in our county in the past 22 years were the result of strangulation. 5) San Diego County Health CARES <ul style="list-style-type: none"> a) C – Conduct Screening for current and former intimate partner abuse 	
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	<ul style="list-style-type: none">b) A – Assess for signs and symptoms of strangulationc) R – Report suspicious injuries to law enforcementd) E – Evaluate patient (evidence collection by a Forensic Examiner)e) S – Safety Plan and connect patient to resources <p>b. Victim Appearance</p> <ul style="list-style-type: none">1) Recognizing strangulation signs and symptoms during medical examinations can save lives!2) >50% of victims have NO EXTERNAL SIGNS3) Only 4 pounds or external pressure required to occlude jugular veins4) Only 5 to 11 pounds of pressure require to occlude carotid arteries5) Unconsciousness can occur within seconds6) Death can occur within 3 to 5 minutes <p>c. Choking vs. Strangulation</p> <ul style="list-style-type: none">1) Strangulation is not choking<ul style="list-style-type: none">a) Choking involved INTERNAL airway obstruction rather than an external force applied to the neck <p>d. Passing the Torch</p> <ul style="list-style-type: none">a) From Criminal justice to Healthcare <p>e. Initiative Goals</p> <ul style="list-style-type: none">a) Tools & Training for Healthcare Staffb) Strangulation Assessment/Universal Screening for intimate Partner Abusec) Further evaluation & Referrals for Forensic Examsd) Suspicious Injury Reportinge) Patient Safety Planningf) Connections to Resources <p>f. Target Settings</p> <ul style="list-style-type: none">a) Civilian and Military Hospitals and Health Systemsb) Colleges/Universities Student Health Centersc) Community Clinics (FQHC'S)d) Medical/Nursing Schoolse) Professional Organizations<ul style="list-style-type: none">i. American Academy of Family Physicians, Hospital Association of San Diego & Imperial County (HASDIC), Stroke Consortium <p>g. County Public Health Nurses</p> <p>h. Initiative Launch</p> <ul style="list-style-type: none">1) Press Conference 10/15/192) Prevention Kits Roll Out3) Train – the – Trainer Event 10/16/194) Poster/wallet cards for healthcare sites5) Website	
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	<p>2. <u>Discussion (Q/A):</u></p> <p>a. What is the reporting obligation of an individual or physician sought for medical advice? Physicians are obligated reporters, since this is considered Domestic Violence.</p> <p>b. Would this an item that we could present to the Coalition? Yes, this would be an item that could be presented to the Coalition.</p> <p>3. Public Comments (related to action items)</p>	
<p>IV. Action Items</p>	<p>A. Acceptance of SNAP Ed Cal Fresh Healthy Living Grant, Thomas Coleman, MD, M.S., Medical Director, PHS, MCFHS Branch.</p> <p>1. Thomas Coleman, MD, M.S., Medical Director, PHS, Maternal, Child and Family Health Services (MCFHS) Branch provided and overall presentation for Acceptance of SNAP Ed Cal Fresh Healthy Living Grant.</p> <p>a. Background:</p> <p>1) The United States Department of Agriculture (USDA) Supplemental Nutrition Assistance Program (SNAP) plays a vital role in improving nutrition for low-income children and adults.</p> <p>a) SNAP-Education (SNAP-Ed) is a component of SNAP which was previously known in California as the Nutrition Education and Obesity Prevention Program.</p> <p>i. In April 2019, it was renamed to the CalFresh Healthy Living Program. The California Department of Public Health (CDPH) is one of the five state agencies providing local health departments grants to implement CalFresh Healthy Living.</p> <p>2) The primary goal of CalFresh healthy Living is to increase the likelihood that low-income individuals will make healthy eating choices and lead physically active lifestyles in line with Dietary Guidelines for Americans published by the United States Department of Health and Human Services and the USDA.</p> <p>3) CalFresh Healthy Living accomplishes this by providing nutrition education and advancing policy, systems, and environmental changes where low-income residents live, learn, play and shop.</p> <p>a) These activities include working with childcare centers school districts, after-school programs food retailers, farmer’s markets, food pantries, and local jurisdictions, as well as working directly with residents and communities to achieve program goals.</p> <p>4) The main objectives of CalFresh Healthy Living are to prevent and reduce the leading risk factors for obesity-related chronic diseases among low-income people, including poor nutrition and physical inactivity. Between October 9, 2012 and September 30, 2018, the CalFresh Healthy Living Program achieved the following outcomes:</p> <p>5) Seven jurisdictions advanced active transportation and healthy food system policies</p> <p>6) Over 5, 000 low income-residents received nutrition education.</p> <p>7) Forty childcare providers were designated as Health and Wellness Champions.</p>	<p>•</p>

	<ul style="list-style-type: none">8) Thirty school districts amended wellness policies to improve access to healthy eating and physical activity for their students.9) Ten school districts amended wellness policies to improve access to healthy eating and physical activity for their students.10) Thirty food retailers receive technical assistance to stock healthier foods, and 10 of the retailers enrolled in the <i>Live Well San Diego</i> Community Market Program.11) Twenty faith-based organizations implemented system and environmental changes to build healthier congregations.12) Thirty-five worksites participated in the Live Well@Work program.13) More than 10 community-based organizations adopted policy and environmental changes to improve access to nutrition and physical activity in their settings.14) Historically, CDPH CalFresh Healthy Living grant award notification has been released after the start date of the grant. For example, the award notification for Federal Fiscal Years 2016-2019 was released on October 13, 2016.15) Award notifications for the upcoming grant term have not been released. Pending award notification, today's action requests the Board to approve and to authorize a new three-year grant for the CalFresh Healthy Living Program Grant with CDPH.<ul style="list-style-type: none">a) In addition, each Federal Fiscal Year, CDPH typically allocates additional funding, referred to as "carry-in funds," to selected local health departments, based on statewide unspent money from the previous year.b) Each federal fiscal year, since 2013, CDPH has awarded the County of San Diego additional carry-in funding to enhance existing CalFresh Healthy Living efforts.c) The CalFresh Healthy Living award, including "carry-in funding," for Federal Fiscal Years 2017 through 2019 was \$13.0 million.<ul style="list-style-type: none">i. It is anticipated that the awarded, including "carry-in funding," from CDPH will be in the amount of approximately for the term of October 1, 2019 through September 30, 2022.16) The proposed action would provide authorization to apply for additional funds that might be used to improve access to healthy food environments and improve opportunities for physical activity for San Diego County Residents.17) The HSAB members approved the Board Letter that would go before the BOS to on September 10, 201918) Greg Knoll Moved and seconded by Tim Fraser19) There were no corrections to the Board Letter.20) All HSAB members in attendance voted Aye, with no oppositions or abstentions. The motion carried and the Board letter was approved. <p>B. Acceptance of Opioid Overdose Data to Action Grant, Wilma Wooten, M.D., MPH, PHS Health Officer/Director</p> <ul style="list-style-type: none">1. Acceptance of Opioid Overdose Data to Action Grant, Wilma Wooten, M.D., MPH, PHS Health Officer/Director.	
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	<p>a. Background:</p> <ol style="list-style-type: none">1) The San Diego County Board of Supervisors (Board) has demonstrated strong support for programs and initiatives addressing the regional opioid epidemic.2) The County of San Diego (County) Health and Human Services Agency (HHS) has been involved in leading the opioid crisis efforts.<ol style="list-style-type: none">a) On December 7, 2010 (16) the Board adopted the County Prescription Drug Abuse Plan.b) On October 9, 2018 (4), the Board authorized the Prescription Drug Task Force to continue to partner with the Safe Home Coalition.c) On July 23, 2019 (5), per Board direction, the updated County Strategic Plan to Address Opioid and Prescription Drug Misuse was presented to and received by the Board.3) On February 1, 2019, the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention (CDC) announced funding opportunity CDC-RFA-CE19-0904: Overdose Data to Action for eligible public health departments nationwide.<ol style="list-style-type: none">a) HHS applied on May 2, 2019 and received award notification on July 22, 2019.<ol style="list-style-type: none">i. This funding will allow the County to expand its surveillance activities for opioid misuse and associated overdose fatalities, emergency room encounters, and to coordinate better targeted evidence-based intervention and prevention strategies.ii. The funds will also allow for an integrative countywide surveillance system to collect and track data, report incidents, and act on opioid-related events.iii. Additionally, this funding will support implementation of the strategies outlined in the Strategic Plan described above.4) Action requested is that the Board to approve and to authorize the Clerk of the Board, upon receipt, to execute a cooperative agreement with the CDC for Overdose Data to Action for the term of September 1, 2019 through August 31, 2022, for a three-year total of approximately \$6,555,684 in funding.5) Authorization is also requested to apply for any additional funds that might be used to help further address the opioid epidemic, as well as other prescription or illicit drugs to the extent that they are associated with the opioid overdose epidemic.6) These Board actions and today's recommended action contribute to the County's collaborative efforts to reduce and/or prevent opioid misuse and opioid overdose fatalities.7) The proposed action supports the County's <i>Live Well San Diego</i> vision to advance the health and well-being of children, adults, and families, as well as promoting a healthy, safe, and thriving region, by implementing strategies to support opioid use surveillance and prevention which will decrease opioid misuse and overdoses.	
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	<ul style="list-style-type: none"> b. Approval <ul style="list-style-type: none"> 1) The HSAB members approved the Board Letter that would go before the BOS to take action on September 10, 2019. 2) Greg Knoll Moved and seconded by Tim Fraser 3) There were no corrections to the Board Letter. 4) All HSAB members in attendance voted Aye, with no oppositions or abstentions. The motion carried and the Board letter was approved. <p>C. Approval of August 6, 2019 Meeting Minutes</p> <ul style="list-style-type: none"> 1. Tim Fraser moved and seconded by Greg Knoll 2. All HSAB members in attendance voted Aye, with no oppositions or abstentions. The motion carried and the Board letter was approved 3. Public Comment (related to action items) 	
<p>V. Chair’s Report</p>	<p>A. Health Services Advisory Board (HSAB) Advance Follow-up Discussion</p> <ul style="list-style-type: none"> 1. Strategic Plan 2. Focused Priorities <p>B. Vacancies Discussion</p> <p>C. Legislative Priorities and guidelines input</p>	
<p>VI. Informational Items</p>	<p>A. Policies and Program: No reports</p> <p>B. Health Legislation: No reports</p> <p>C. Budget: No reports</p>	
<p>VII. Public Health Officer’s Report</p>	<p>A. Communicable Disease Updates: Meningococcal Disease Outbreak:</p> <ul style="list-style-type: none"> 1. As of 8/22/2019, no new cases have been identified. The next planned response meeting is October 2019 and will take place once the new SDSU school starts in September. 2. Influenza: <ul style="list-style-type: none"> a. 8/22: one influenza death was identified among a 74-year-old male who died on August 15 as a result of influenza B and underlying health complications. <ul style="list-style-type: none"> 1) A press release was issued on 8/22/2019 about this death. b. To date, since July 1, 2019, there have been 106 reports of lab confirmed Influenza within San Diego County. c. The annual Kick the Flu Summit will occur on September 18 at the San Diego City Library from 9am to 12:30 pm. <ul style="list-style-type: none"> 1) This event brings together medical and health partners in order to provide season updates, empower and inform participants to promote flu vaccinations throughout San Diego County. 3. Shigellosis <ul style="list-style-type: none"> a. Ongoing efforts: The Epi Program continues to monitor for increases in reported cases, conducting investigation on all reported cases, and monitoring for shifts in population groups being affected the most from this disease. 	

	<p>4. Measles:</p> <ul style="list-style-type: none"> a. As of July 24, 2019, there have been 135 reported suspect cases of measles which required evaluation and investigation. There have been 148 lab samples tested in the Public Health Lab. None of these have been confirmed to be a case of measles. b. There have been 148 lab samples tested in the Public Health Lab. None of these have been confirmed to be a case of measles. c. Between January 1, 2019 and July 24, 2019, the cost to the county to respond to increased measles activity has been \$79, 121. O this, \$26,964 has been costs due to increased lab testing of suspect case specimens. <p>5. Shiga Toxin-Producing <i>E. Coli</i>:</p> <ul style="list-style-type: none"> a. On June 28, 2019, the County of San Diego Health and Human Services Agency (HHSA) reported four confirmed or probable pediatric cases of Shiga toxin-producing <i>Escherichia coli</i> (STEC) that may be related to contact with animals at the San Diego County Fair. b. As of July 31, 2019, 11 confirmed cases and two probable cases have been reported in this outbreak. Three people were hospitalized, and one child has died. The outbreak has been determined to be caused by a specific strain of STEC O157:H7 c. San Diego County Department of Environmental Health Food Inspectors conducted investigations of the food booths associated with the reported foods consumed by the ill cases. There were no commonalities between food items and food booths. d. All cases in this outbreak did report visiting the animal areas, which included the petting zoo, or had other animal contact at the fair. Animal and environmental testing conducted to date by the County and State has found no STEC O157:H7 bacteria. This investigation included testing of all petting zoo animals, all pony ride horses, and two cattle from the livestock barn that were present throughout the possible timeframe that the cases visited the fair. In addition, 32 environmental samples from the petting zoo and livestock barn showed no signs of STEC bacteria. <p>B. Further information on Public Health Officer’s report can be found at:</p> <p>http://sandiego.networkofcare.org/content/client/1448/HSAB_Health_Officer_Notes_9_3_19.pdf</p>	
<p>VIII. Public Comment (Related to the Agenda Items)</p>	<p>A. No Public Comment</p>	
<p>IX. Agenda Items – Suggested Future Meetings</p>	<p>A. Annual Youth Risk Behavior Survey – (TBD 2019) B. Community Health Assessment, Community Health Improvement, and Public Health Services Strategic Plan (TBD 2019) C. Hepatitis C Elimination Board Memo (November 2019)</p>	
<p>X. Adjournment</p>	<p>A. Meeting was adjourned at 4:50 PM B. Next Meeting: October 1, 2019, from 3:00 pm to 5:00 pm, County Administrative Center Rooms 302/303</p>	
<p>XI. Supplemental Information</p>	<p>A. Aging and Independence Services Update – Long Term Care Integration Project</p>	