



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





Tuesday, October 5th, 2021
3:00pm to 5:00pm
Microsoft Teams
MEETING MINUTES

Members Present	Members Absent/Excused	Presenters	HHSA Support
Afflalo, Suzanne, Dr., Vice Chair Alverson Rodriguez, Lisa Arroyo, Geysil Correa, Linda Fraser, Tim Hailey, Katelyn Heygi, Paul Knoll, Gregory Lepanto, James Chair Melgoza, Ana Seldin, Harriet, Dr. Sumek, Caryn (Alternate) Walters, Todd Yates, Judith	Alexiou, Dimitrios Dailey, Jack (Alternate) Jantz, Barry Ohmstede, Jennipher (Alternate) Remington-Cisneros, Therese Schultz, James Shaplin, Judith Tuttle, Henry Wade, Lindsay (Alternate)	<i>County of San Diego, Binational COVID-19 Response, Presentation</i> <i>Justine Kozo, MPH, Chief, Public Health Services (PHS) Administration</i> <i>Misinformation as a Public Health Crisis Board Memo</i> <i>Presentation</i> <i>Elizabeth A. Hernandez, PhD., Acting Director, PHS Administration.</i>	Dr. Wilma Wooten, Public Health Officer & Director, PHS Dr. Elizabeth Hernandez, Assistant Director, PHS Dr. Anuj Bhatia, Deputy Director, PHS Dr. Kelley Motadel, Child Health Officer, MCSD Dr. Ankita Kadakia, Medical Director and Branch Chief, TCRH Dr. Maggie Santibanez, AMSA, TCRH Adrienne Yancey, Acting Branch Chief,

Members Present	Members Absent/Excused	Presenters	HHSA Support
			<p>MCFHS Romina Morris, Dep. Budget Mgr., PHS</p> <p>Alison Sipler, Program Coordinator, MCFHS</p> <p>Christine Bride, HPPS, MCFHS</p> <p>Danielle Dorrington, Admin. Analyst III. PHS Admin</p> <p>Rodrigo Ibanez, Admin Analyst III, TCRH</p> <p>Catherine Bender, TEP, TCRH</p> <p>Marti Brentnall, CHPS, TCRH</p> <p>Pedro Hirsch, Administrative Secretary II, PHS Admin</p> <p>Anna-Mai Trinh Administrative Secretary II, PHS Admin</p> <p>Additional COSD Staff Present:</p>

Members Present	Members Absent/Excused	Presenters	HHSA Support
			<p>Amy Thompson, Executive Finance Director, HHSA</p> <p>Ardee Apostol, Asst. Group Finance Dir, HHSA</p> <p>Other Attendees:</p> <p>Kozo, Justine Beeston, Tara</p>

Minutes	Lead	Follow- up Actions	Due
	James Lepanto	Bring back a proposal in January meeting (Formal Report) for youth subcommittee	Jan.
Next Meeting: HSAB Meeting: Tuesday November 2 nd 2021, 3:00 – 5:00 pm – Microsoft Teams			
Agenda Item	Discussion		
I. Welcome & Introductions	<ol style="list-style-type: none"> James Lepanto called the meeting to order at 3:04 PM. <ol style="list-style-type: none"> Southeast live well center – Break ground Vista Crisis Stabilization Unit - Free standing Unit \$9 Million in funding for Childhood Obesity – to lower the amount with three separate grant. Roll call was noted, and quorum established. 		
II. Action Items	<ol style="list-style-type: none"> Approval of October Agenda and September Meeting Minutes 		

	<p>a. Agenda: Moved by Tim Fraser and seconded by Arroyo Geysil.</p> <p>b. Minutes: Moved by Tim Fraser and seconded by Suzanne Afflalo.</p> <p>All HSAB members in attendance voted Aye, with no oppositions or abstentions. The motions carried and the documents were approved.</p> <p>2. Final meeting in November. Dark in December 2021.</p> <p>3. No public comment.</p>	
<p>III. Public Comment</p>		
<p>IV. County of San Diego, Binational COVID-19 Response, Presentation Justine Kozo, MPH, Chief, Public Health Services (PHS) Administration</p>	<div>  <div> <h3>HHSA PUBLIC HEALTH SERVICES OFFICE OF BORDER HEALTH</h3> </div>   </div> <ul style="list-style-type: none"> • Inaugurated in 1993 • Cross border communication, collaboration, and coordination at the local level (San Diego/Tijuana) • Key Activities: Relationship Building, Support Infectious Disease Surveillance, Collaboration on Key Initiatives, Health Diplomacy  <div> <div>  <p>Justine Kozo, MPH Chief, Office of Border Health</p> </div> <div>  <p>Izzybeth Rodriguez-Prats, MPH Community Health Program Specialist</p> </div> <div>  <p>Ivette Lorona Graduate Student Worker</p> </div> <div>  <p>Thelma Navarro Graduate Student Worker</p> </div> </div>	



HHSA DEPARTMENT OF HOMELESS SOLUTIONS & EQUITABLE COMMUNITIES



Barbara Jiménez, MPH
Community Operations Officer

HHSA Executive Binational Lead

Cross border collaboration examples include:

- **Launched:** Binational *Love Your Heart/Ama Tu Corazón*
- **Advisor:** CDPH Office of Binational Border Health Advisory Board
- **Facilitator:** Leaders Across Borders/Líderes Atraves de las Fronteras
- **Co-Chair:** Border Health Consortium of the Californias
- **Lead:** COVID-19 Binational Sector



Purpose

- Knowledge Sharing
- Capacity Building
- Relationships
- **Work Groups:** HIVE, TB, Obesity, Mental Health, Cancer

Objective: To address health priorities in the border region, network and share information with one another

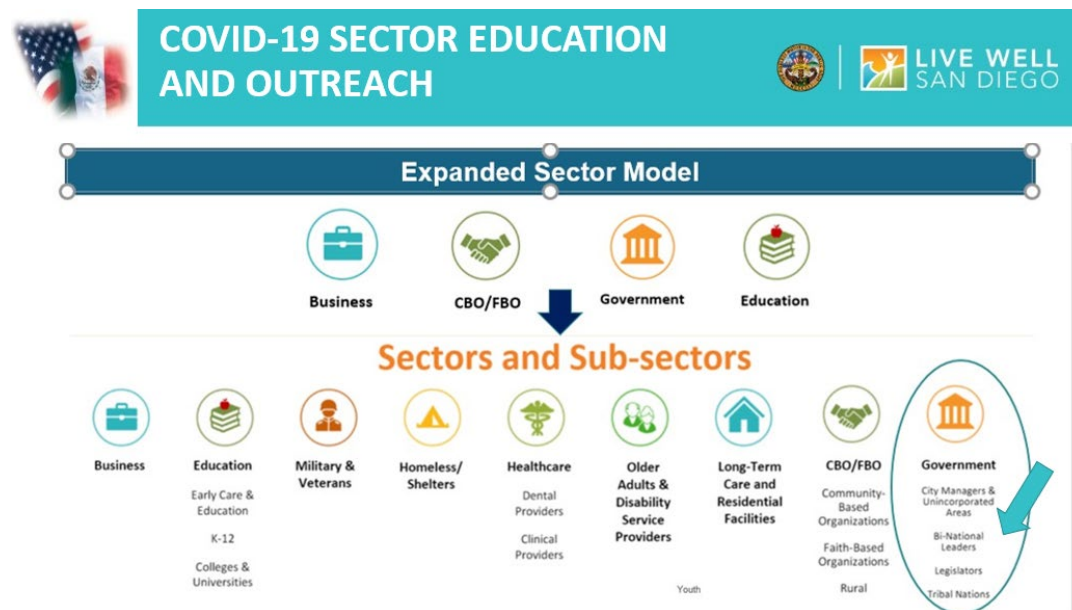
Focus: North of the border

Meetings: Bi-monthly meetings in San Diego

Cross border collaboration examples include:

- Binational epidemiology surveillance-binational case reporting

- **Lead:** CDPH Office of binational Border Health, Border Infections Disease Surveillance program
- Binational Epidemiology Meetings
 - HIV Collaboration
- Other cross-border related projects:
 - Vector-Borne & Zoonotic Disease Meetings
 - Cure TB



County organized into ten critical sectors

- **Binational Sector** is led by Barbara Jimenez and Justine Kozo is colead

Activites included

- Regular telebriefings with key binational partners
- Sharing data & informational resources

	<ul style="list-style-type: none">• Establishing key connections• Testing & vaccine strategies to support binational population <p>Due to these existing cross-border partnerships, when the COVID-19 pandemic began in early 2020, we immediately began communicating and strategizing on a binational response. In order to streamline activities, we set up a Binational sector to facilitate communication, response strategies, share data, and offer support to partners on both sides of the border.</p> <p>The Binational sector began hosting biweekly calls on March 26, 2020 in partnership with ISESALUD, Health Services Jurisdiction of Tijuana, Tecate and Rosarito, Baja California and other key binational partners, primarily government agencies. Twenty-eight calls have taken place to date.</p> <p>In addition to frequent calls, the binational sector responds daily to complex inquiries and requests and coordinates with partners to develop guidance and solutions. Examples include connecting physicians in Tijuana and San Diego to provide cross-border medical care, providing data reports to the Mexican Consulate in San Diego, and coordinating the delivery of cross border donations including personal protective equipment, supplies for migrant shelters, and COVID-19 tests.</p> <p>Another component has been the development of strategies to improve testing and vaccine access to our binational community through setting up sites at convenient locations near the border crossing and working with the Mexican Consulate to create awareness and improve accessibility.</p>	
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CROSS BORDER VACCINE EFFORTS



Mexican Consulate as a community -trusted testing & vaccine site



Mobile Teams Deliver Vaccines to San Diego Farmworkers



Cross-border Maquiladora Vaccine Project

Vaccinees for H-2A Agricultural Workers

- This slide highlights some specific binational vaccine efforts.
- We have a great partnership with the Mexican Consulate here in San Diego and they have been an instrumental player in helping administer both COVID-19 testing and vaccines to our community. The Consulate is trusted by the community and individuals feel safe and welcome when they visit their location in Little Italy.
- In partnership with the Mexican Consulate, UCSD, the Secretary of Health in Baja California, Customs Border Protection and many binational business partners, we were able to implement a pilot border vaccine project. Over a couple weeks in June of this year, thousands of vaccines were provided to US-owned Tijuana Maquiladora employees at the San Ysidro Point of Entry. Over 10,000 individuals were vaccinated and it really is an outstanding example of the type of cross-border collaboration, coordination and strong partnerships that exist in our binational region.
- Also, I'd like to highlight another partnership with the California Department of Public Health and the US Consulate in Tijuana who were able to provide free COVID-19 vaccines to H-2A workers crossing into the U.S. from Tijuana, Mexico, at vaccination sites near the U.S.-Mexico border.



Questions and Comments

Question from James Lepanto: What has happened with the vaccines? How is the Tijuana region doing as far as getting people vaccinated?

Answer from Justine Kozo: 80% of their population has been vaccinated. Just started opening in Oct.

Question from James Lepanto: Which vaccines are they using?

Answer from Justine Kozo: Multiple

V. Misinformation as a Public Health Crisis Board Memo
Presentation
Elizabeth A. Hernandez, PhD.,
Acting Director, PHS
Administration.



Implementation Plan
Health Misinformation

HEALTH MISINFORMATION A PUBLIC HEALTH CRISIS

Implementation Plan

Health Services Advisory Board
October 5, 2021



10/12/2021

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HEALTH MISINFORMATION A PUBLIC HEALTH CRISIS



GOAL



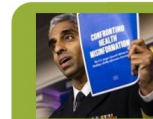
CONFRONTING HEALTH MISINFORMATION

*The U.S. Surgeon General's Advisory on
Building a Healthy Information Environment*

The U.S. Surgeon General's Advisory on Building a Healthy Information Environment calls the American people's attention to health misinformation and provides recommendations for how to build a healthier information environment.

Addressing health misinformation will require a whole-of-society effort.

"I am urging all Americans to help slow the spread of health misinformation during the COVID-19 pandemic and beyond. Health misinformation is a serious threat to public health. It can cause confusion, sow mistrust, harm people's health, and undermine public health efforts. Limiting the spread of health misinformation is a moral and civic imperative that will require a whole society effort." – Dr. Vivek H. Murthy



To implement strategies cited by the U.S. General's Advisory to build a local healthy, safe, and thriving information environment.



- Strategy A: Counter Misinformation
- Strategy B: Community Engagement
- Strategy C: Research Efforts
- Strategy D: Sector Trainings
- Strategy E: Government Partners
- Strategy F: Resource Gaps
- Strategy G: External Website

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STRATEGY A



EVALUATING COVID-19 INFORMATION



Devote resources to identify and label health misinformation and disseminate timely health information to **counter misinformation** that is impeding our ability to keep our communities safe.

Objectives

A.1. Conduct community based and culturally and linguistically appropriate messaging to provide factual health information and to dispel myths and misinformation in order to increase COVID-19 immunizations rates.

A.2. Create a dedicated website to be a central resource for combating health misinformation in our community.



New Webpage for Addressing Claims About COVID-19



- How to Find Accurate Information
- Trusted and Dependable Resources
- Scholarly Journals



- COVID-19 Claims and Facts on:
- Children
 - Masks
 - Testing
 - Vaccines



- Overview and Symptoms
- Risk of Infection and Serious Illness
- Testing and Treatment
- Quarantine and Isolation
- Prevention
- COVID-19 Vaccines
- Healthcare
- Congregate Living Facilities
- Social Interactions
- County of San Diego Efforts
- FAQs from Other Sources
- Additional Sources

STRATEGY B



STRATEGY C



Modernize PH communications with investments to better understand gaps in health information, and questions and concerns of the community, especially in hard-to-reach communities. Develop targeted **community engagement** strategies, including partnership with trusted messengers.

Objectives

B.1. Host critical conversations in the community with a focus on **high-risk populations**, to discuss the importance of vaccinations.

B.2. Dispel myths and misinformation of providers and their staff by conducting academic detailing with health care providers.

B.3. Address misinformation and disseminate information and links to trusted sources via social media platforms.

B.4. Identify and train trusted community-level spokespersons to communicate the importance of vaccination and the ramifications COVID-19 cases poses on the community.



Expand our **research efforts** to better define and understand the sources of health misinformation, document, and trace its negative impacts, and develop strategies to address and counter it across mediums and diverse communities.

Objectives

C.1. Perform a survey of unvaccinated persons to better understand San Diego's view of the COVID-19 vaccines.

C.2. Develop comprehensive media campaign to counter vaccine hesitancy and address local community members concerns.



STRATEGY D



Invest in resilience against health misinformation including digital resources and **training for health practitioners and health workers**. Explore educational programs to help our communities distinguish evidence-based information from opinion and personal stories.

Objectives

D.1. Partner with community practitioners in addressing vaccine misinformation/hesitancy and develop messaging.

D.2. Partner with professional healthcare associations in addressing vaccine misinformation/hesitancy and developing messaging.

D.3. Partner with healthcare systems to address vaccine misinformation/hesitancy and developing messaging.



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STRATEGY E



Partner with federal, state, territorial, tribal, private, nonprofit, research, and other local entities to identify best practices to stop the spread of health misinformation and develop and implement coordinated recommendations.

Objectives

E.4. Partner with educational institutions to address vaccine misinformation/hesitancy and developing messaging.

E.5. Partner with places of worship in addressing vaccine misinformation/hesitancy and developing messaging.

E.6. Partner with media organizations in addressing vaccine misinformation/hesitancy and developing messaging.



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STRATEGY E



Partner with federal, state, territorial, tribal, private, nonprofit, research, and other local entities to identify best practices to stop the spread of health misinformation and develop and implement coordinated recommendations.

Objectives

E.1. Work with federal and state entities in addressing vaccine misinformation and hesitancy by developing messaging.

E.2. Identify best practices to stop the spread of health misinformation, in partnerships with tribal health authority and leaders.

E.3. Develop and implement coordinated health services and resources in partnership with tribal health authority and leaders.



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STRATEGY E



Partner with federal, state, territorial, tribal, private, nonprofit, research, and other local entities to identify best practices to stop the spread of health misinformation and develop and implement coordinated recommendations.

Objectives



E.7. Partner with businesses in addressing vaccine misinformation/hesitancy and developing messaging.

E.8. Partner with community sectors in addressing vaccine misinformation and hesitancy by developing messaging.

E.9. Participate in the COVID-19 Equity Task Force to ensure underrepresented communities are provided access to information and services.



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	<div> <div> <div>STRATEGY F</div> <div>  <p>Identify resource gaps to combating health misinformation and working with state and federal partners to meet ongoing needs.</p> </div> </div> <div> <div>Objectives</div> <div> <p>F.1. Disseminate up-to-date state and federal COVID-19 communications to dispel health misinformation in the community (e.g., pregnancy and breastfeeding).</p> </div> </div> </div> <div> <div>STRATEGY G</div> <div>  <p>Work with the medical community and local partners to develop a website that will serve as a central resource for combating health misinformation in our community.</p> </div> </div> <div> <div>Objectives</div> <div> <p>G.1. Develop an external COVID website to combat health misinformation.</p> </div> </div>
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A. HSA HSAB Youth Engagement Options, James Lepanto, HSAB Chair, Tara Beeston, MPH, Community Health Program Specialist and Sharon Hughes, MPH Administrative Analyst, Office of Strategy and Innovation.

Comment from James Lepanto:

Comment from Suzanne Afflalo: Great idea to have the youth involved to get insight on how they process things and learn about their community. It's vital to understand what they need and respect their intellect and ideas.

Comment from James Lepanto: We're providing value to the board of supervisor by giving them the voice of youth and passing that along.

Comment from Greg Knoll: Suggestion to have three youth come to report and represent various parts of the community (Communities that have been left behind).

Comment from Arroyo Geysil: We can collaborate with the San Diego Community Colleges

Comment from Ana Melgoza: It's important that we allocate resources to combat new diseases and threats that are hurting our children.

Comment from Caryn Sumek: Having the youth rotate schedules to have it more flexible. Please let us know if there is anything we can do to help.

Comment from James Lepanto: I agree that we have to make it flexible and it allows for a great deal of diversity.

Motion:

1. Moved by Greg Knoll and seconded by Arroyo Geysil
2. The motions carried and the documents were approved

B. Community Inspiration Awards.


1. Event date 12/14/2021

C. Community Input Workgroup

1. CalAIM

Question from Greg Knoll: What is the community forum supposed to be about?

	<p><u>Answer from James Lepanto:</u> Regarding CalAIM and manage care board letter</p> <p><u>Question from Greg Knoll:</u> Have you thought about doing it in conjunction with our board with healthy san diego board which is responsible for over site of medical manage care?</p> <p><u>Answer from James Lepanto:</u> I think all of that is an option. My goal is to convene a work group where we can discuss these options on how to move forward.</p> <p><u>Comment from Harriet Seldin:</u> I agree that healthy san diego should be a apart of the discussion.</p> <p>D. HSAB Annual Accomplishments Report. 1. In the process</p> <p>E. HSAB Advance in 2022. 1. February 2022</p> <p>F. COVID-19 Updates. 1. Press Briefings on County Facebook page: https://www.facebook.com/sandiegocounty/</p>	
VII. Informational Items	<p>Comment from James Lepanto re all these topics</p> <p>A. Subcommittee and Work Group Updates.</p> <ol style="list-style-type: none"> 1. Policies & Program <ul style="list-style-type: none"> • Looking for new Sub. Committee Chair 2. Budget. <ol style="list-style-type: none"> a. October meeting 3. Legislative Committee. 4. Community Inspiration Awards Work Group 5. Nominating Committee <ul style="list-style-type: none"> • Chair and Vice chair every 2 Years • I will reach out to three people for nomination committee • Send an email to James if interested <p>No questions/comments</p>	

VIII. Health Officer Report	 Final_HSAB_Health_O fficer_Report_10_5_21	
IX. Round Table	<u>Comment from Afflalo, Suzanne, Dr:</u> Oct. is breast cancer awareness month. Giving free mammograms 40 and above who are eligible. Flu vac. Covid Vac, B/P screening and raffles. Jackie Robinson YMCA on the first Wednesday of the month 10:00 am – 3:00 pm.	
X. Public Comment (on agenda items)	No comments or questions	
XI. Adjournment	Meeting adjourned at 4:47 pm.	
XII. Supplemental Information	Next HSAB Meeting: Tuesday November 2 nd , 2021, 3:00 – 5:00 pm – Microsoft Teams	