

Pima County Board of Health Minutes  
May 27, 2020

**Teleconference Meeting**  
Abrams Building, Room 1108  
3950 S. Country Club Road  
Tucson, Arizona 85714

**1. CALL TO ORDER**

Dr. Horwitz called meeting to order at 3:00PM

ATTENDANCE:

Mr. Bin An - Absent  
Ms. Betty Villegas  
Mr. Rene Gastelum  
Mr. Charles Geoffrion, Vice President - Absent  
Ms. Mary Lou Gonzales - Joined after roll call  
Dr. Paul Horwitz, President  
Mr. Mike Humphrey - Joined after roll call  
Dr. Kathryn Kohler  
Mr. Miguel Rojas  
Dr. Gail Smith  
Ms. Carolyn Trowbridge

**A quorum was established (7)**

Non-Board Members

Dr. Bob England, Pima County Health Department Interim Director  
Dr. Theresa Cullen, Pima County Public Health Director  
Paula Mandel, Pima County Health Department Deputy Director  
Dr. Donald Gates, Pima County Health Department, Budget Manager

**2. PLEDGE OF ALLEGIANCE**

Due to Teleconference Meeting the Pledge of Allegiance was not conducted.

**3. MINUTES ADOPTION**

- Adopted Board of Health Minutes April 22, 2020

The motion was made and seconded (Mr. Rojas/Dr. Kohler) that the April 22, 2020, Board of Health Minutes be adopted no further discussion. Motion carried 7 – 0.

**4. INTRODUCTION OF NEW DIRECTOR**

- Dr. Horwitz spoke about Dr. Theresa Cullen, the incoming Pima County Health Department Director, whom he has known for over 30 years. He spoke about Dr. Cullen's impeccable character, her administrative experience in the federal government, and her long association with Dr. Bob England, who was her classmate in medical

school. Dr. Horwitz advised the Board that Dr. Cullen prefers to be called Terry, and that he has the utmost respect for her and that she is a wonderful person, very qualified and easy to deal with, and that he is very pleased with the decision to hire her to replace Dr. Bob.

## **5. DIRECTOR'S UPDATE**

- Dr. England opened the update with a discussion on where the Health Department (HD) budget sits right now based on the COVID-19 response, per Dr. Horwitz's request to know what the process will look like as it pertains to statutes rules and short- and/or long-term changes that may occur from using funds from the CARES Act and other sources, as well as pending deadline dates and other concerns. Dr. England asked Don Gates to provide information to the Board on where the HD is in the process.

Dr. Gates advised that Pima County Board of Supervisors adopted its FY2021 budget in special hearings recently. Prior to that, the County Administrator sent out directives requiring significant cuts in supplies, travel, training, and an initial 3% cut in personnel expenses with a subsequent 5% cut to follow. The County Administrator also instructed the County departments that it was likely – or at least possible – that there would be a salary reduction implemented in January 2021 if County revenues did not reach a sufficient threshold for normal operations.

Dr. Gates noted that the Health department, as a special health fund group, requested a variation from the cuts that were being imposed on all of the other departments. The HD agreed to a fund subsidy reduction that would meet the total value of the cuts without having to actually reduce PCNs, and as such has only had to suffer a \$35K decrease in its expenditure authority but a \$1.5M decrease in its general fund subsidy.

Dr. Gates mentioned that previously the HD was projecting to have a health fund balance surplus in the range of \$6M-\$7M at the end of this year, and thus were able to avoid, or accommodate, the subsidy reductions. And so, between the anticipated revenue reduction from the COVID closures, the general fund subsidy reduction, and from increased expenses in other areas, the HD will normalize its health fund balance and be able to accommodate FY2021 changes with undue difficulty.

Ms. Gonzales inquired if the raise being planned for Public Health Nurses is out of the budget and no longer being considered now. Dr. Gates said that it will be a more difficult situation but that doesn't necessarily mean that the effort should stop.

Mr. Humphrey and Mr. Rojas then inquired if there would be pay cuts for County Administrator Chuck Huckleberry or his key staff, and Dr. Horwitz asked if pay cuts are being considered across the Board or not. Supervisor Villegas responded that as far as she is aware there are no pay cuts right now as that part of the budget was not to be considered at this time, and it was also her understanding that pay cuts are not going to happen.

Dr. Horwitz asked what the term length would be on a pay cut if it doesn't involve every employee. Dr. Gates advised that the initial memo laid out a plan for graduated cuts based on the individual employee's compensation, and that was presented as being comprehensively across-the-board with the expectation that there would be a sunset, but nothing was specified. Dr. Horwitz inquired what percentage was specified, and Dr. Gates advised that the range was from 2% to 8%, which he believes is the ceiling.

Mr. Keith Bagwell from Supervisor Villegas's office confirmed that pay cuts were removed from the budget adoption just a couple of days before the current adoption took place so that is no longer on the table at this time. Dr. Horwitz asked why the pay cuts were removed, and if they could be proposed for the future. Mr. Bagwell replied that yes, the pay cuts could always come back, but that they were removed from the tentatively adopted budget because Mr. Huckleberry issued a memo indicating he had decided the pay cuts weren't going to be needed.

Dr. Horwitz asked Dr. Gates to keep the Board up-to-date on the budget process so that it can be put on the agenda.

Mr. Rojas asked if there was any money coming from DC (federal government) to deal with this problem (COVID-19)? Supervisor Villegas confirmed that Pima County received \$87M from the CARES Act, and monies from that are being used for many items with the HD.

Dr. England noted that the Arizona Department of Health Services (ADHS) has received a \$150M grant from the Epidemiology and Laboratory Capacity (ELC) cooperative agreement from the US Centers for Disease Control and Prevention, much of which will be distributed to the counties. Dr. England said that Pima County Health Department (PCHD) is waiting to hear eligibility requirements and the amount of money that will be distributed, and is hoping to do some really key infrastructure work with those funds moving forward. Expects those details will be available for the next board meeting.

There was additional discussion regarding the CARES Act funds. Dr. Horwitz asked who is in charge of overseeing the CARES Act monies at the county level, and Supervisor Villegas advised that it is the County Administrator. Dr. England mentioned that the point of the CARES Act is to reimburse the local governments for all COVID-19 eligible expenses, but not for COVID-related loss of revenue. Dr. England noted some of the expenses eligible for reimbursement include salaries, supplies, temporary housing, rental of hotel space to use for isolation, and testing, but the majority is for the Public Health Response. Also, Arizona Governor Doug Ducey has been talking about redistributing some of the ADHS funds to the smaller municipalities for their expenses.

Dr. Horwitz asked if this funding will come close to covering the expenses Pima County has incurred in the COVID-19 response. Dr. England remarked that the total PCHD budget from County revenue – the Public Health Fund – is roughly \$11M annually, and the CARES Act funding is nearly 8 times that amount, so he feels that these funds will cover all the recent and near-future spending on supplies and testing that has been done.

Dr. Gates noted that current PCHD expenditures plus immediate encumbered expenses are on the order of \$8M, and while there are plans to significantly increase those expenditures when supplies become more available, he feels that PCHD is reasonably situated with the CARES Act funds and the current spending pattern.

Mr. Humphrey inquired if PCHD will be enhancing the environmental health outreach to businesses. Dr. England advised that the issue with supplying entities with Personal Protective Equipment (PPE) has not been an issue of money, but rather an issue of the supply chain not being able to meet the demand for basic PPE at this time. This has gotten better over time, and ADHS is due to receive some large shipments from other jurisdictions. However, PCHD has got to prioritize certain types of PPE for healthcare facilities that need them, because the situation remains that some long-term care facilities are currently risking their lives reusing equipment that is not intended for reuse, so it is critical to get PPE to healthcare workers first.

Dr. England continued the Director's update by discussing how critical the next few weeks will be in light of the recent reopening and subsequent relaxation of required social mitigation. He expects that the impact of the relaxation will become more apparent in early June, and noted that a couple of things may happen:

- May have a big spike;
- May have a gradual increase to rate of transmission and rate of cases;
- May continue to see a good trend of decreasing impact from this disease IF the virus itself begins to behave seasonally and is transmitted less during the summer months, which would be good news in the short-term, but not necessarily in the long-term.

The good news if the virus behaves seasonally is that it buys us more time, and there's a chance that really good treatment discoveries will be made and we'll be that much closer to a vaccine by the time we hit that second wave. However, the more seasonally this virus presents and the fewer people are infected through the summer, the potential is there for this virus to come back with a vengeance in the late fall and through the winter. A recurrence in the late fall could be bad for multiple reasons:

- It would be coincident with regular respiratory virus and flu season so it will be less obvious what people have;
- It bodes very poorly for the healthcare system to be able to handle the surge;
- It will require giving people multiple tests in order to identify what is going on.

Dr. England gave an overview of contact tracing, something that Public Health has done for decades for various diseases which tend to be less-common infections, and disease for which there is a good intervention or important information available for someone to keep them from progressing to more serious disease. He advised that PCHD is putting a lot of effort into redesigning their entire case investigation and contact tracing effort to prepare for what is coming. Keeping COVID-19 transmission really low, or trying to eliminate it via contact tracing, is going to be impossible because there are a lot of people whose exposures are unknown, and a lot of people who won't cooperate. It's worth the effort to do contact tracing but it will only slow the transmission of the disease, not

prevent it, and Dr. England advised the Board to be prepared for less than perfect results no matter how good a job PCHD does.

Supervisor Villegas asked if actual COVID testing done in Pima County includes people tested more than once. Dr. England confirmed that actual test counts do include people who have had more than one test, from both the diagnostic testing and antibody testing. He also advised that the turn-around time for test results can be between 48 hours to more than a week. Dr. England asked the Board members to consider the following questions:

- Are people who need testing most getting it?
- And, will people get their test results back in enough time for it to make a difference to them?

Mr. Humphrey asked if there is a plan to help long-term care facilities get control of their ability to reduce their infection rates. Dr. England advised that long-term care facilities have been a priority since Day One. PCHD has prioritized PPE to long-term care facilities; every one of them has a liaison; have utilized academic expertise from the University of Arizona to help guide their infection control practices; they are prioritized for testing, and are contracting with entities to testing in the facilities. The goal is to do a one-time background level of everybody in a long-term care facility, then periodically retest those who are coming and going to try to nip outbreaks in the bud. Dr. England also reiterated that long-term care facilities are extremely high risk, and that 60% of all fatalities (not cases) have come from those facilities. He also noted that long-term care facility workers – staff - make up roughly 1/3 of all long-term care facility reported cases.

Supervisor Villegas inquired about the recently reported UPS outbreak, and Dr. England informed the Board that PCHD offered assistance but UPS management decided against assistance as they felt there was nothing new offered that they weren't already trying to do. And due to the extensive process required in getting information on an outbreak, as it currently stands that information is not provided in time for public health workers to get in there and try to address the outbreak early. Dr. England said this is one of the areas where PCHD is changing our policy and our procedure to get to quicker. Dr. Horwitz asked if laws need to be changed to force employers to report these things. Dr. England advised that there are reporting requirements in place for reporting outbreaks in certain types of facilities, such as childcare, schools, healthcare facilities, and that law changes are something the Board may decide to look at once PCHD has changed our process.

Mr. Rojas brought up the subject of zip code mapping, and Dr. England responded that he is absolutely sure community transmission is higher than others in areas with lower socio-economic neighborhoods, those with higher bus travel, or those with less access to healthcare. He noted it is abundantly clear that people with underlying health conditions are more likely to suffer the consequences from this disease, and that it is obviously disproportionately distributed across socio-economic and neighborhood lines. Dr. England will have Suzanne Goodman forward a report compiled by Mark Persons that analyzes the socio-economic categories of higher risk and rates to the Board. Dr. England will also send a link for the dot map that was produced to indicate where cases are, so the Board can see how that plays out over time.

Dr. England then concluded his Director's Report with heartfelt words of appreciation and gratitude for his time as Interim Director over the past 12 months of a 3 month job. He mentioned how he has really grown to love the community – both Tucson and Pima County – and the PCHD. He noted that this department is chock-full of really good, talented, dedicated people. Dr. England mentioned the fact that nobody quit, and that people have been working 60-80 hour work weeks, doing whatever was necessary and doing it incredibly competently, which he said bodes really well for the future of this place. Dr. England said he is very relieved to be leaving the PCHD in the hands of Dr. Theresa (Terry) Cullen, who he then introduced.

Dr. Terry Cullen provided a little bit about her own background:

- Went to high school in Phoenix
- Went to college in California
- Lived on the Navajo reservation where she taught for 2 years
- Went to medical school with Bob England
- Went to Cook County in Chicago for internship
- Was a National Health Service Corps scholar for 1 year, but left to move back to Arizona
- Had a 25 year career with the Public Health Service, serving as a public health officer at the San Carlos Apache reservation, and following that at Tohono O'odham in San Javier where she eventually became the Medical Director. She was at Tohono O'odham between 1986 through 1999, and even had the opportunity to work with Miguel Rojas when he was part of the State Public Health department at that time.
- Got into Health Information Technology and, after receiving a Masters in Population Health and Administration, became the Chief Information Officer for Indian Health Services.
- Spent a year working at the Department of Health and Human Services setting up new governance for Health Information Technology, and for large budget requests for CMS and NIH
- Retired and went to Virginia, where she was the Chief Medical Information Officer for the Veteran's Association, nationally, for 4 years
- Joined the Regenstrief Institute – a non-profit institute affiliated with Indiana University – and worked for almost 5 years in low- and middle-income countries doing health systems strengthening, health information technology, public health and population health
- Heard from her youngest daughter about the open position of Director for the Pima County Health Department, and sent in her resumé and a cover letter, and then discovered that Dr. Bob England was the Interim Director who was vacating the position
- Hired with the PCHD and started working part-time in May 2020, increasing that to full time for the final week of May, and transitioning on June 01, 2020 as the new Public Health Director

Dr. Cullen mentioned that she is really excited and feels really blessed to have this position, as she has never actually worked in Tucson. Many of Dr. Cullen's extended family are in Tucson, so she welcomes the opportunity to give back to the community that's been so good to her.

Dr. Cullen did note that she doesn't know that she would have chosen to become the Health Director in a pandemic, but sometimes life give you opportunities you weren't planning on. She welcomes the opportunity to work closely with the Board members, and she is very impressed by the people she's met and had the opportunity to work with so far in the Health Department.

Dr. England mentioned that he is very comfortable passing on the baton to Dr. Cullen, particularly because of the data understanding she brings combined with her passion for health equity, and the caring she has for the communities, and he doesn't know anybody who is better poised to enter this job at this point and time.

Dr. Horwitz thanked Dr. England on behalf of the Board for his involvement, commitment and leadership in all that he's done in – and for – the community and the citizens of Tucson during his time at PCHD. Dr. Horwitz invited Dr. England to feel free to pop in on any Board of Health meetings if he felt so inclined.

Dr. Horwitz asked Dr. Cullen if the COVID-19 YouTube updates would be continued, because he feels they are comforting to the community. Dr. Cullen confirmed that the video updates would continue, and that there has been some discussion with the Public Health Director of the Tohono O'odham Nation to share in presenting, as well as other people willing to participate in them. Dr. Cullen also mentioned that the reach of social media for the Health Department in April was over one million views, which is very, very significant.

## **6. CALL TO AUDIENCE**

- Dr. Gates clarified that the expenditure limitation was set in the tentative budget adoption, with the final budget adoption being set for June 23, 2020.

## **7. SUMMATION OF ACTION ITEMS & PROPOSAL OF FUTURE ITEMS**

- Supervisor Villegas followed up on the Board request for her to contact Chairman Valadez and ask that he send an official request to the jurisdiction for more communication between all parties during the COVID-19 pandemic. Supervisor Villegas reported that this communication was already being done by council conferences on a weekly basis. Most of the time this was handled by County Administrator Huckleberry, but Chairman Valadez has requested that he be a part of these weekly meetings moving forward. It is Chairman Valadez's intention to begin leading the meetings, which he hopes will result in getting that communication going with the rest of the jurisdictions.

- Dr. Horwitz requested that Board members please be sure to communicate planned teleconference attendance to Suzanne Goodman as there have been some miscommunications, and to ensure there is a quorum.

Dr. Horwitz reminded the Board to send him any items for the agenda.

**8. ADJOURNMENT**

The motion was made and seconded (Mr. Rojas / Ms. Gonzales) that the May 27, 2020 meeting adjourn. Motion carried 9-0.

The meeting adjourned at 4:53PM

The next meeting is scheduled for June 24, 2020, at 3:00 P.M.