

Pima County Board of Health Minutes
August 22, 2018
Abrams Building, Room 1108
3950 S. Country Club Road
Tucson, Arizona 85714

1. CALL TO ORDER:

Dr. Horwitz called the meeting to order at 3:00 P.M.

Attendance was as follows:

Board Members:

Mr. Bin An - Absent

Mr. Richard Elías - Absent

Mr. Rene Gastelum

Mr. Charles Geoffrion

Ms. Mary Lou Gonzales - Absent

Dr. Paul Horwitz, President

Mr. Mike Humphrey

Mr. Miguel Rojas

Dr. Gail Smith

Ms. Carolyn Trowbridge, Vice President– Arrived Late

A quorum was established (6)

Non-Board Members:

Dr. Marcy Flanagan, Pima County Health Department Director

Ms. Paula Mandel, Pima County Health Department Deputy Director

Presenters:

Dr. Francisco García, Assistant County Administrator, Pima County

Ursula Nelson, Director, Department of Environmental Quality, Pima County

2. PLEDGE OF ALLEGIANCE

Mr. Humphrey led the Board in the Pledge of Allegiance.

3. MINUTES ADOPTION

- Adopted Board of Health June 27, 2018 minutes.

The motion was made and seconded (Mr. Rojas / Mr. Humphrey) that the June 27, 2018 minutes be adopted as written. Motion carried 6-0.

4. **DIRECTOR'S UPDATE**

- Dr. Flanagan updated the Board about Vital Records revenue for last fiscal year following the change to the State's electronic health record system (DAVE). Initially there was concern that the implementation of DAVE would result in a reduction in revenue however, the fiscal year ended with \$300,000 above the expected revenue. Dr. Flanagan will continue to monitor and report to the Board.
- Dr. Flanagan reported that the Public Health Emergency Preparedness Program (PHEP) is applying for Project Public Health Ready accreditation. The application will be submitted by August 31, 2018. The PHEP team will give a presentation to the Board about the accreditation process and the benefit to Pima County.
- Dr. Flanagan updated the Board on a measles exposure that occurred in Northern Arizona (Sedona) sometime between August 6, 2018, and August 8, 2018, by an out-of-state visitor. There are not any cases in Pima County linked to this measles exposure. The State issues alerts to all counties whenever there is this type of exposure and will continue to be monitored. The Board will be updated if the status changes.

5. **NOMINATIONS OF BOH OFFICERS FOR THE ELECTION BALLOT:**

- Dr. Horwitz announced that the BOH Officer elections will be held next month for BOH President and Vice President. Dr. Smith nominated Dr. Horwitz as President. Seconded by Mr. Rojas. Motion carried (6-0). Mr. Humphrey nominated Mr. Geoffrion for Vice President. Seconded by Mr. Rojas. Motion carried (6-0).

6. **TOBACCO 21:**

- Dr. Horwitz introduced Dr. Francisco García who shared some history regarding the T21 initiative and possible strategies for moving forward. In 2013, when Dr. García was the Health Department Director he participated in discussions regarding a licensing initiative that would identify local tobacco vendors, license them to sell tobacco products, and impose penalties if found selling to minors. This proposed licensing initiative was shared with the Chambers of Commerce and other stakeholders to solicit their feedback where it received pushback from the commercial real estate community, grocery store operators, and small operators who voiced concern that the language was restrictive and inconsistent between municipalities and counties. In lieu of a statewide adoption of T21, which is what Hawaii has had success with, Pima County could collaborate with the City of Tucson to develop and adopt a licensing initiative that encompasses a large geographic area representing unincorporated Pima County and the City of Tucson jurisdictions.

If the Board of Health is interested in pursuing the T21 initiative, Dr. García recommends presenting the BOS with a two-step approach. First step is to create a tobacco retail license that includes non-combustible tobacco products because one does not exist today. Second, consider an inspection schedule that would take place twice a year.

Considerations discussed:

- Cost of implementation is estimated to be \$250,000 in order to conduct inspections twice a year.

- There are approximately 600-750 tobacco retailers within the city limits and does not include those selling nicotine delivery systems. It is difficult to know how many are selling both.
- Tobacco licenses could be made available for businesses when applying for a business license.
- In Arizona, Cottonwood and Douglas are the only two municipalities that have a retail restriction and the local law agencies are responsible for enforcement. They recruit youth to conduct “sting” operations that lead to education and diversion programs and opportunities before imposing fines or penalties.
- If it were decided by the BOS to move forward with T21 initiative, an implementation plan that outlines recommendations and associated costs would be prepared and provided to the Board and BOS.

Board members posed the following questions and considerations:

Mr. Humphry will propose to the BOS a resolution in support of T21 that includes all municipalities within Pima County. He will also work with County staff to identify ways to implement, enforce, and pay for this initiative. This resolution will include all tobacco and nicotine delivery systems as well as combustible tobacco.

Mr. Geoffrion inquired if there is a clear definition that identifies vaping as combustible. Dr. García explained that Smoke Free Arizona Law only applies to combustible tobacco products, those requiring a heat source, which is why it is important to be explicit and recommend the inclusion of nicotine delivery systems in the initiative. Additionally, Mr. Geoffrion inquired if there was data regarding vaping harm to those who are 18. Dr. García informed the Board of a report from National Academy of Science Engineering and Medicine that identifies the impacts of electronic nicotine delivery systems and evidence of substantial harm to those less than 21 years of age.

Mr. Humphrey and Mr. Geoffrion offered to continue to work with PCHD staff and the County Attorney’s office to ensure forms of non-combustible nicotine delivery systems such as vaping and Juul are included in the resolution. Dr. García recommended that the Board and advocacy agencies reach out to the BOS to help them understand concerns and issues through the T21 initiative and the benefits to Pima County residents . .

Ultimately, if the BOS agrees to move forward with this initiative, they will provide direction to develop the ordinance that creates a licensing regime, determine the age limit, and identify funding for implementation in coordination with Pima County Attorney’s Office and the City of Tucson.

Mr. Humphrey submitted a draft of the resolution for the Board prior to being presented to the BOS. and motioned for the draft resolution to be approve (changing the word concludes to predict and changing the number 5 to 6) motion was seconded by Mr. Rojas. Motioned carried 6-0.

7. CALL TO AUDIENCE:

- Dr. Horwitz introduced Jeff Van Arsdale, a health and wellness teacher with Empire High School. Several of his students who were in attendance, shared their stories of cigarettes and other forms of nicotine and the negative impacts to the health of their friends and peers. These students have been working with the City of Tucson, and the Vail school district educating their communities of the harmful effects of all forms of nicotine, and the national movement in support of T21.

Dr. Horwitz introduced Kay Wolferstetter, representing the American Cancer Society, who spoke on the statistics of tobacco products. She reported that 95% of adult smokers try their first cigarette before the age of 21 and in Arizona; \$2.38 billion is spent on health care each year. If additional efforts to combat tobacco use are not introduced it is estimated that 5.6 million of today's youth in the U.S. are at risk to die prematurely from smoking-related illnesses. Ms. Wolferstetter attended the meeting to voice her support of T21.

8. **EMERGING CONTAMINANTS IN DRINKING WATER**

Dr. Horwitz introduced Ursula Nelson, Director for Pima County Department of Environmental Quality (PDEQ) who presented information regarding contaminants found in water wells in Marana and Davis Monthan Air Force Base (DMAFB). PDEQ is the official regulatory enforcement agency for drinking water standards in Pima County and are testing wells in Marana in response to calls from concerned citizens. The contaminants of concern that were identified through testing are Perfluoroalkyls (PFAS) and 1,4 Dioxane and currently there are not any regulatory standards for these compounds in drinking water.

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Characteristics of Perfluoroalkyls (PFAS):

- fluorinated
- form strong bonds
- do not breakdown easily
- are hard to detect
- has been used worldwide in industry and consumer products
- is no longer manufactured in the US
- imported

Health risks for PFAS noted to occur in laboratory animals

- reproductive
- developmental
- liver and kidney
- immunological effects
- carcinogenic
- causes tumors

Characteristics of 1,4 Dioxane

- is stable and does not breakdown
- manufactured in the US
- used in lotions and make up

Health risks for 1,4 Dioxane noted to occur in laboratory animals:

- a carcinogenic
- causes tumors

In 2016, the EPA established concentration threshold levels for PFAS and 1,4 Dioxane and continue to assess and adjust threshold level recommendations which has resulted in confusing health messaging. Recently, these two compounds were found to be above the EPA's recommended health advisory level in the Marana water system. The Town of Marana hired Carollo Engineers to evaluate the water to make recommendations for

removing the compounds. Marana City Council decided to develop a water treatment system, unfortunately, the treatment is expensive and only addresses one of the compounds.

Arizona Department of Environmental Quality (ADEQ) recently analyzed surface and groundwater samples in Pima County Health Department for 1,4 Dioxane and PFAS. The testing was performed along approximately 18 miles of the Santa Cruz River between the Roger Road Reclamation Facility to Marana Road. The second area tested covered approximately 24 miles and included 42 groundwater samples from West Mission Lane to West Grier Road. The testing revealed:

- PFAS was detected in 11 surface water samples and in 30 of the 42 groundwater samples.
- 1,4 Dioxane was detected in 10 of 11 surface water samples and in 8 of 40 groundwater samples.

These results indicate the compounds are quite prevalent and in general they come from unaware industrial sources that are ubiquitous, appearing items such as clothing, cooking surfaces, and other materials.

Dr. Horwitz inquired if reverse osmosis will remove these compounds. Ms. Nelson indicated that water filters and reverse osmosis can reduce exposure.

Ms. Trowbridge voiced concerned regarding evidence of the compounds on DMAFB where historically they have had issues with well water as far back as 1976. Ms. Nelson shared that these compounds are unregulated and PDEQ is not able to take action. The EPA is able to monitor levels using the Unregulated Contaminant Monitoring Program to collect data for contaminant suspected to be present in drinking water. In 1996, the Safe Drinking Water Act was introduced and requires the EPA to issue a new list of 30 unregulated contaminants that are to be monitored in public water systems that provides a means to reduce exposure. Ms. Nelson shared with the Board that due to the lack of these compounds being regulated DEQ is unable take action. It is important to also note that neither bottle water nor private wells are regulated which is a concern.

Pima County DEQ and the Health Department are working together will continue to remain engaged with the federal government, who is in a lead role. Additionally, PCHD and Pima County DEQ will assess available information from a health perspective regarding the potential to reduce exposure with water filters and maintaining them per the manufacturers specifications Dr. Flanagan reported that Pima County representatives have also met with the University of Arizona to collaborate on this issue regarding policy development and will share information with the Board, BOS, and our community leaders as work in this area advances.

9. ACCIDENT AND INJURY UPDATE:

- Dr. García presented to the Board a report of accidents and injuries in Pima County that is part of the Community Health Needs Assessment (CHNA) completed in 2016, which evaluates the impact of accidents, and injuries from personal use vehicles, motorcycles, heavy/public transit vehicles, and other/unspecified MODALITIES, in Pima County Health Department. The data relied upon two data sources, the hospital discharge

database (inpatient and emergency department encounters) and the medical examiner's report (deaths that are sudden, violent, unexpected, unknown). Hospitals and the Office of Medical Examiners (OME) are required to report this information to the State where it is reviewed and analyzed. In 2016, Pima County OME reported over 11,000 deaths included 80% motor vehicle accidents, 17% were due to bicycle or pedestrian injuries. 3% involved a firearm injury.

Hospital encounters related to firearm injuries include 50% due to an assault, 35% due to accidental firearm injuries (which are largely preventable), 7% were due to self-harm. On an epidemiology standpoint these cases are largely male, between 18-24 year old, white and Hispanic. The communities considered hotspots for firearm injuries related to hospitalization are Picture Rocks, Tucson Foothills, Flowing Wells, Tucson South, Drexel Heights, Valencia West and San Xavier. These figures cut across our community and provides a way to strategically adapt prevention approaches. As a trauma facility, Banner Medical Center handles a bulk of injuries related to firearms.. The medical costs associated with firearm injuries are predominately paid with public funds via AHCCCS, Medicare, and Indian Health Services. Less than 15% of these cases have a behavioral health diagnosis.

In 2016, the Medical Examiner reports firearm deaths by intent data with 69 percent being suicide, 28 percent were homicides, and 1% were accidental. This data includes where the death occurred and where the decedent lived. Mr. Humphrey asked for an example of an undetermined intent. Dr. García stated that when the examination is being conducted if it is unknown if the injury was by suicide, accident, or homicide it will be considered an undetermined intent.

Additionally, the Medical Examiner report of accidental death counts enumerated according to type accident and sex of the decedent. In 2016 men were more likely to die. However, as deaths from motor vehicles, motorcycles, and bicycles are more preventable and survivable focusing on prevention policy work could result in better counteraction measures.

Within the 2016 Medical Examiner report of deaths by accident according to type of accident and age group reflects firearm deaths as highest among ages 18-74 and for motor vehicle deaths, the highest occurred among ages 18-24 then again for those age 75 and older.

Due to the sensitivity of accident and injury data it is important that steps are taken to handle it carefully. Dr. García has tasked the Health Department and Office of Medical Examiner to collaborate efforts to develop a report that informs the community of impacts associated with accidents and injuries while also managing the privacy aspect.

Suggestions and considerations from the Board include utilizing census data as well as calculating the economic loss and costs associated by jurisdiction in Pima County. If there is a way to access the data, Dr. García will add this layer of information to an upcoming presentation.

10. PACC UPDATE:

Dr. Smith invited the Board to tour PACC and see the completed Phase II renovation of the original 50 year old building. On June 23, 2018, 10 PACC volunteers and staff walked about 200 dogs to their new kennels which are double sided and have both an inside and outside area. Additionally, there is now a small dog area with large playrooms and bedding.

On June 26, the staff moved into their new permanent space in the new building. The temporary tent was taken down after 4.5 years which provided overflow housing to over 20,000 dogs during its time. Euthanasia statistics have shown a decrease from approximately 15,000 dogs a year to 1,500 a year.. Of those 1,500 being euthanized is due to illnesses and aggressiveness. The grants from Maddie's Fund has established what is expected to be the nation's largest foster based program in the nation. Last year, Maddie's Fund helped with fostering over 3,200 pets in the community and offering a different kind of exposure then those in the kennels experience. PACC has sent over 2,100 pets to rescue groups to be rehabilitated and ultimately adopted. All of these efforts have supported a live release rate of 90 percent for this past fiscal year.

The Pet Support Services team receive over 8,000 calls a month from people that want to surrender their pet. This team has been able to provide guidance to many by helping them find agencies to help with free food, medical costs, leashes, collars, and fencing that help many keep their pet.

PACC has 1,300 volunteers and have donated 102,000 hours of service this past fiscal year which is the equivalent of 38 full-time staff positions.

There have been negative reporting about dangerous dogs being released to the public with bite histories. Dr. Smith informed Board members that this is not accurate, PACC has adoption counselors who provides a full history of each dog before they are adopted back into the community. The number of dog bites reported in Pima County has not increased. Dr. Smith will provide a copy of the report Kristen Auerbach, PACC Director developed and sent to the BOS.

11. SUMMATION OF ACTION ITEMS AND PROPOSED AGENDA ITEMS:

Dr. Horwitz summarized the action items to include the next meeting is September 26, 2018, Ms. McClendon will confirm Mr. Rojas' contact information for attendance, and to continue to email Dr. Horwitz in a timely manner for addition of agenda items.

12. ADJOURNMENT:

The meeting adjourned at 5:03 P.M.