

Pima County Board of Health Minutes
October 24, 2018
Abrams Building, Room 1104
3950 S. Country Club Road
Tucson, Arizona 85714

Approved

1. CALL TO ORDER:

Mr. Charles Geoffrion called the meeting to order at 3:00 P.M.

Attendance was as follows:

Board Members:

Mr. Bin An - Absent

Mr. Richard Elías

Mr. Rene Gastelum

Mr. Charles Geoffrion, Vice President

Ms. Mary Lou Gonzales

Dr. Paul Horwitz, President - Absent

Mr. Mike Humphrey

Mr. Miguel Rojas

Dr. Gail Smith – Absent

Ms. Carolyn Trowbridge

A quorum was established (7)

Non-Board Members:

Dr. Francisco García, Assistant County Administrator, Pima County

Dr. Marcy Flanagan, Pima County Health Department Director

Ms. Paula Mandel, Pima County Health Department, Deputy Director

Presenters:

Mary Kinkade, Senior Special Staff Assistant, Pima County Health Department

Nicholas Cogdall, Senior Special Staff Assistant, Pima County Health Department

2. PLEDGE OF ALLEGIANCE

Ms. Trowbridge led the Board in the Pledge of Allegiance.

3. MINUTES ADOPTION

- Adopted Board of Health September 26, 2018 minutes.

The motion was made and seconded (Mr. Rojas / Ms. Gonzales) that the September 26, 2018, minutes be adopted as written. Motion carried 7-0.

4. DIRECTOR'S UPDATE

- Dr. Flanagan shared with the Board that the Centers for Disease Control and Prevention (CDC) has awarded the Pima County Health Department with the Racial and Ethnic Approaches to Community Health (REACH) Grant with a budget of just over \$800,000 a year for the next four years. The Health Department was one of only 32

agencies who were awarded a grant following a highly competitive process. The Health Department leadership are currently collaborating with the CDC and the University of Arizona to develop a work plan and budget by November 15, 2018. The work plan will target the American Indian and Hispanic populations in Pima County with a focus on tobacco prevention, physical education/activity, and nutrition. The hiring process for the Program Manager and team for the grant is underway. Once the team is in place and the implementation strategies have been identified a presentation will be provided to this Board at a future meeting.

- There has been an increase in the locally acquired Zika cases in Sonora, Mexico. The Health Department is conducting surveillance of mosquito activity and are trapping and testing mosquitos. On October 23, 2018, the Arizona Department of Health Services (ADHS) sent information to medical providers to ensure they are testing patients when they present with symptoms, to remind patients to protect themselves from mosquito bites, and encourage pregnant women to limit their travels to areas that have high incident of Zika. The Health Department is communicating the same message via media, newsletters, and other electronic message platforms.
- There has been a few cases of Hepatitis A occurring among people who have eaten at food trucks and restaurants who buy seafood from unapproved sources in Mexico. The FDA does not test food that come from unapproved source making it difficult to pinpoint the type of seafood. The surveillance team from ADHS are working with their counterparts in Mexico in an effort to identify the food vendor and so the food can be tested. The Health Department will continue to work with ADHS and our Border partners to prevent unapproved seafood from coming into the US.

Ms. Gonzales inquired if any cases have come from the raw sewage in Mexico. Dr. Flanagan explained that Hepatitis A shot clinics have been provided and none of the cases identified are associated with the sewage.

Mr. Humphry inquired if there has been any issues with the seafood in Rocky Point. Dr. Flanagan responded that anytime food is purchased from an unregulated source there is a risk. The consumer health and food safety staff, epidemiologist, and nursing staff are investigating these cases and none have been associated with traveling to Rocky Point.

- Dr. Flanagan provided an update on the mass migration coming from Honduras. The Department of Emergency and Military Affairs (DEMA) has been in contact with the Border counties in Arizona. There is a conference call on Friday that will include DEMA, the Health Department's public health emergency preparedness team and other local health officers to discuss public health preparedness regarding the potential need for services. Mr. Humphrey inquired if there will be any attempt to keep children and their parents together. Dr. Flanagan reported that she will not know until after Friday's conference call. An update will be shared with the Board following Friday's conference call.
- Dr. Flanagan asked the Board when to schedule the next meeting with the holiday season coming up. In the past November's and December's meetings where made into one. The motion was made and seconded (Mr. Rojas / Mr. Geoffrion) to schedule the next meeting for December 5, 2018.

Ms. Gonzales inquired about the polio like illness that is affecting children. Dr. García reported that the CDC had disclosed that there has been multistate cases of Acute Flaccid Myelitis (AFM) an enteric virus that affects the nervous system, specifically the spinal cord and can result from a variety of causes including viral infections. AFM seems to impact children which has made this notable. The virus itself has not been well characterized. The last time Pima County had a case was in 2012. Arizona has four cases, none in Pima County. Surveillance of AFM indicates that this may be a seasonal virus. At this time there are no cases to report. Standard personal precautions should be followed to include handwashing, avoid going into work when sick, cover mouth when coughing/sneezing and don't share body fluids. Dr. García noted that there is not a test to detect AFM.

Ms. Gonzales inquired about the syphilis cases. Dr. Flanagan reported that syphilis continues to be active. The Community Health Needs Assessment (CHNA) data reveals that the trend in Arizona is consistent with the trend nationally. All STD's are on the rise with a significant increase (1,000%) among the Native American population and a notable increase among females. The Health Department continues to provide awareness and prevention messaging through education and the availability of testing and treatment.

Dr. Flanagan provided the Board with an update regarding flu. There has been an increase in the number of cases reported in the state. It is early in the season and difficult to determine if this season will be better or worse than last season. There are a few confirmed flu cases in Pima County and Health Department staff are promoting prevention messaging and the importance of getting a flu shot, as well as offer information regarding alternate locations and agencies where the public can get the flu shot. In regards to personal precautions during large public events, the food permitting process includes education and guidance for food vendors that includes the number of handwashing stations and port-a-potties required.

5. TOBACCO 21 UPDATE:

- Dr. García reported to the Board that Tobacco 21 may be placed on the agenda for January 2019 of the Board of Supervisor (BOS) meeting. Members of this Board are encouraged to be in attendance at that meeting. The agenda item is to propose a text amendment to Pima County Code that includes three components: (1) increasing the legal age to 21 for the purchase of tobacco products, (2) establishing a retail permit to sell combustible and non-combustible tobacco products establishing enforcement authority for the Health Department, and (3) inclusion of other smoke-free nicotine delivery systems. Presenting the text amendment in three components provides the capacity for the BOS's to take action on one or all three components of the recommendation. The Arizona Attorney General's Office has informed Pima County Administration that Pima County is restricted from using state funds for Tobacco 21 enforcement activities that are outside of mandates within the Arizona State Revised Statues. Supervisor Elías shared that the BOS will discuss the percentage of full cost-recovery. It might be more advantageous for the County to pay for the first year and share that data and our processes with the other jurisdictions to create a successful collaboration. Dr. García recommended that the first six months be a voluntary compliance system that provides

education and outreach for vendors. Mr. Rojas met with his BOS member who voiced concern during their meeting about aspects such as enforcement, cost, and equity.

6. GLOBAL INFECTION:

Mr. Geoffrion shared with the Board that his company is developing new technologies that are reducing the transfer of pathogens in hospitals, airlines, and cruise lines. The CDC and World Health Organization (WHO) reported that some infectious diseases are either new or re-emerging due to drug resistance, hygiene, and other factors. The approach to these diseases involve an interdisciplinary method due to increased urban populations, climate change, and the spread of known and new diseases. In America, infectious diseases are spreading but are less of a threat due to vaccinations, improved sanitation, effective treatment and epidemiologic surveillance. The social and economic consequences are driven by income inequality, living in crowded conditions, working when sick, poor nutrition, substance and alcohol abuse, and poor public housing conditions. The rates of obesity and diabetes are increasing which impair immunity. Globally, the spread of diseases are accelerating due to climate change and viruses such as West Nile virus that spread across the US in six years. The Zoonotic diseases are the biggest risk for epidemics and pandemics with many reaching American shores. Scientists are correlating outbreaks with shifting weather patterns including El Nino and La Nina that affect migration patterns of birds and mosquitos where some diseases originate and may result in an outbreak. According the WHO, global warming may increase the number of people at risk of diseases such as malaria and bluetongue. Ebola is a disease that appears in areas where humans live next to wildernesses and consume bush meat.

The GPS news segment, *What in the World*, from CNN's Fared Zakaria, was shared with the Board.

7. HEALTHY PIMA UPDATE / CHNA UPDATE:

Dr. Flanagan introduced Mr. Cogdall and Ms. Kinkade who provided an update regarding Healthy Pima and the Community Health Needs Assessment (CHNA). Currently, Healthy Pima has seven task forces and three coalitions working to address the four health priorities identified through the 2015 CHNA: (1) anxiety and depression, (2) accidents and injuries, (3) substance dependency, and (4) diabetes. The Health Department supports Healthy Pima members by providing strategic planning and logistical support. Ms. Kinkade provided examples of activities Healthy Pima groups are working on. For example, Healthy Pima's Fall Prevention Coalition comprised of older adult service agencies, healthcare providers, fire districts, and university faculty have created a fall-risk assessment tool to guide healthcare professionals in assessing risk for injury from unanticipated falls.

Next, Mr. Cogdall provided an overview of the current CHNA process. The process includes two paid consultants responsible for analyzing local and state health data and collecting community input through surveys, focus groups, key informant interviews and community forums. The first forum had over 40 participants who were asked to identify pressing health issues, barriers, and potential resources in the Pima County region. The second forum is scheduled for November 30, 2018 and will be held at the Abrams Public

Health Center, 9 – 11 am. The final report will identify the new health priorities for Pima County and is expected to be released in January 2019.

Invitations along with a link to the community survey will be sent to Board members. Board members are encouraged to share the invitation and surveys with their respective constituents. This process benefits from high involvement and community engagement. Board members noted additional agencies and locations to promote the survey, libraries, homeless shelters, and immigrant populations as well as grass-root effort to increase recognition and participation of affected populations.

8. **BIKE PROGRAM UPDATE:**
There was not enough time to review this item.
9. **CALL TO AUDIENCE:**
There was not enough time to review this item.
10. **SUMMATION OF ACTION ITEMS AND PROPOSED AGENDA ITEMS:**
There was not enough time to review action items.
11. **ADJOURNMENT:**
The meeting adjourned at 5:08 P.M.