

**COUNTY OF LOS ANGELES  
PUBLIC HEALTH COMMISSION  
APRIL 11, 2013  
MINUTES**

**APPROVED**

**COMMISSIONERS**

**Patrick Dowling, M.D., M.P.H., Chairperson\*\***  
Jean G. Champommier, Ph.D., Vice-Chair\*  
Waleed W. Shindy M.D., M.P.H.\*  
Michelle Anne Bholat, M.D., M.P.H. \*

**DEPARTMENT OF HEALTH SERVICES REPRESENTATIVE**

Jonathan E. Fielding, Director of Public Health and Health Officer\*\*\*  
Angela Haley, Secretary\*  
Public Health Commission

**PUBLIC HEALTH COMMISSION ADVISOR**

Cynthia Harding, Chief Deputy\*  
Public Health

**PUBLIC HEALTH COMMISSION YOUTH ADVISOR**

Vacant

**\*Present \*\*Excused \*\*\*Absent**

<b>TOPIC</b>	<b>DISCUSSION/FINDINGS</b>	<b>RECOMMENDATION/ACTION/ FOLLOW-UP</b>
<b>I. CALL TO ORDER</b>	The meeting was called to order at approximately 10:05 a.m. by Vice-Chairperson Champommier at Central Health Center.	Information only.

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<b>II. ANNOUNCEMENTS &amp; INTRODUCTIONS</b>	<i>Introductions of Commissioners and guests were conducted.</i>	<i>Information only.</i>
<b>III. APPROVAL OF MINUTES</b>	<b>MOTION: APPROVAL OF FEBRUARY 28, 2013 MINUTES</b>	<i>Vice-Chairperson Champommier entertained a motion from Commissioner Shindy, seconded by Commissioner Bholat and carried unanimously.</i>

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<b>IV. PUBLIC HEALTH REPORT</b>	<p>                             Cindy Harding provided the Commission with a Public Health Report and discussed public health activities since the last report on March 28, 2013.                         </p> <p> <b>Key Indicators of Health</b> </p> <p>                             Ms. Harding distributed and discussed the Key Indicators of Health, a publication that was put out based on data from DPH's health survey.                         </p> <p> <b>Homeless Tuberculosis Outbreak</b> </p> <p>                             Ms. Harding provided an update on the Homeless Tuberculosis Outbreak memo that was sent to the Board of Supervisors.                         </p> <p>                             The report also addresses the Board motion offered by Supervisor Antonovich in which the motion instructed DPH to work with the Department of Health Services (DHS) to determine available isolation beds for individuals who may require hospitalization to complete their course of treatment. The motion required DPH to consult with Olive View Medical Center to determine if an expansion of their current TB isolation bed capacity is warranted on a temporary basis                         </p>	

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<p><b>IV. PUBLIC HEALTH REPORT CONTINUED</b></p>	<p><i>within existing funding. Finally, this report addresses the request included in the motion to explore the availability of potential federal funding for any additional costs incurred as a result of DPH's containment and treatment activities.</i></p> <p><b>2012 Annual HIV Surveillance Report</b></p> <p>The 2012 Annual HIV Surveillance Report highlights include:</p> <ul style="list-style-type: none"> <li>• <i>In 2011, L.A. County reported 1,880 new HIV diagnoses, accounting for 38% of California's 4,950 HIV diagnoses reported in that year.</i></li> <li>• <i>Included in this year's report are three National HIV/AIDS Strategy (NHAS) indicators that measure the success of jurisdictions in getting persons newly diagnosed with HIV into care, keeping them retained in care, and on adequate treatment to suppress their viral load. Comparable to a recent national indicator report, DPH estimates that, in 2010, 79% of persons newly diagnosed with HIV in L.A. County get into care within three months.</i></li> <li>• <i>While accounting for less than 1% of population and persons living with HIV, American Indian/Alaskan Native (AI/AN) persons were second only to Black/African Americans in the race/ethnic-specific HIV prevalence rate (768 versus 998 per 100,000 population respectively).</i></li> </ul>	

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<p><b>IV. PUBLIC HEALTH REPORT CONTINUED</b></p>	<p><b>Impact of "City of Los Angeles Public Health Protection Act"</b></p> <p><i>Ms. Harding discussed the memo/report to the Board regarding DPH's analysis of the proposed measure's provisions, the impact that passage of the measure might have on public health services for the City and the County, the fiscal and workforce impact to the County, and the fiscal impact to the City.</i></p> <p><b>Working to Protect and Improve Health</b></p> <p><i>The week (April 1-7, 2013) was National Public Health Week. This gave DPH the opportunity to share the things that DPH does to protect health, prevent disease, and promote health and well-being in L.A. County. Also, how DPH addresses and improves individual and community health throughout the county. Ms. Harding indicated that there were two events for Public Health Week: 1) On Tuesday, April 2, 2013 at Grand Park, focusing on employees health; and Thursday, April 4, 2013 at El Pueblo de Los Angeles Historical Monument for the general public and provided free health screenings and education.</i></p>	

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<p>V. PUBLIC HEALTH INVESTIGATION (PHI) REPORT</p>	<p>Leola Mercadel, Chief, Public Health Investigation (PHI), provided an update of the activities within PHI.</p> <p><b>Objectives</b></p> <ul style="list-style-type: none"> <li>• Describe PHI Responsibilities</li> <li>• Update Commission on:</li> <li>• PHI Website and Custodian of Records (COR) function</li> <li>• PHI Quality Improvement Activities</li> <li>• Adult Film Industry Act Implementation</li> </ul> <p><b>PHI Mission</b></p> <p>"To safeguard the public's health by developing a workforce competent in mandated communicable disease interventions and enforcement of related public health laws."</p> <p><b>PHI Responsibilities</b></p> <ul style="list-style-type: none"> <li>• Mandated functions of the Health Officer related to communicable disease intervention and control</li> <li>• Locate cases and contacts to disease and refer for medical care</li> <li>• Educate clients</li> </ul>	

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<p><b>V. PHI REPORT CONTINUED</b></p>	<ul style="list-style-type: none"> <li>• Motivate compliance</li> <li>• Remove threats to the public's health</li> <li>• Enforce laws related to communicable disease control</li> </ul> <p><b>Areas of PHI Practice</b></p> <ul style="list-style-type: none"> <li>• Sexually Transmitted Diseases</li> <li>• HIV/AIDS</li> <li>• Tuberculosis</li> <li>• Acute Communicable Diseases</li> <li>• Commercial Sex Venue Inspections</li> <li>• Adult Film Industry Act</li> <li>• Emergency Preparedness and Response: Bioterrorism events, naturally occurring disease outbreaks, and natural disasters.</li> <li>• Areas of PHI practice not related to communicable disease control: Marine Biotoxin (May 1<sup>st</sup> – October 1<sup>st</sup>), Custodian of Records Function, and Homebirth Verifications</li> <li>• These functions are coordinated by PHI Administration</li> </ul>	

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<p>V. PHI REPORT CONTINUED</p>	<p><b>PHI Website and Custodian of Records (COR) Function</b></p> <ul style="list-style-type: none"> <li>• Department of Public Health – Policy 341: “Public Health Investigation shall function as the designated Custodian of Records for the Department”</li> <li>• PHI Administration accepts and responds to subpoenas duces tecum and requests for public records pursuant to the CA Public Record Act.</li> <li>• Function as the Custodian of Records for the Health Haz-Mat Unit of the L.A. County Fire Department</li> </ul> <p><u>Problem</u>                      Office spends a large portion of the day answering calls related to submission of requests and subpoenas, completing request forms from mortuaries, and formatting the information into databases.</p> <p><u>Goal</u></p> <ul style="list-style-type: none"> <li>• Provide information about all COR services</li> <li>• Provide online forms for public record requests</li> <li>• Answer frequently asked questions</li> <li>• Provide users capability to submit request via fax or email</li> <li>• Reduce time and labor related to manually completing request forms and other documents</li> </ul>	



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<p>V.PHI REPORT CONTINUED</p>	<p><u>Outcomes</u></p> <ul style="list-style-type: none"> <li>• Dedicated COR Email Account established January 2013</li> <li>• PHI Website launched February 2013</li> <li>• Customer use of PHI Website services well received as indicated by steady increase in number of requests submitted on new forms.</li> </ul> <p><u>Next Steps</u></p> <ul style="list-style-type: none"> <li>• Customer Service Survey sent to 281 requestors to measure satisfaction with COR services and current method of submitting request.</li> <li>• Enhance functionality of website by allowing the public to complete forms online, submit via secure internet, and migration of request form to a database.</li> </ul> <p><u>Quality Improvement Activities</u></p> <ul style="list-style-type: none"> <li>• Interviewing Skills Assessment</li> <li>• Field Validation Audits</li> <li>• Weekly Reviews</li> <li>• New Reports: Performance Measures, Workload, and Productivity</li> </ul>	

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<p>V.PHI REPORT CONTINUED</p>	<p><u>Next Steps</u></p> <ul style="list-style-type: none"> <li>• Implement Case Management Processing (CMap)</li> <li>• An electronic workload tracking system that will replace old Paradox system</li> <li>• Capable of generating workload, performance measures, and productivity reports</li> </ul> <p><b>Measure B Implementation</b></p> <ul style="list-style-type: none"> <li>• LACC, Title 11, Chapter 11.39, titled the "Safer Sex in the Adult Film Industry Act" became effective December 14, 2012 in the unincorporated areas of L.A. County and in those cities adopting the ordinance.</li> <li>• Purpose is to improve the safety of workers in the Adult Film Industry.</li> <li>• Adult film producers must complete the following to obtain an Adult Film Production Public Health Permit:</li> <li>• Provide proof of successful completion of a County approved Bloodborne Pathogen Training Course</li> <li>• Submit and receive approval for an Exposure Control Plan that meets all requirements of CCR Title 8, Sections 3203 and 5193</li> </ul>	

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V.PHI REPORT CONTINUED	<ul style="list-style-type: none"> <li>• Require the use of condoms for any act of vaginal or anal sexual intercourse</li> <li>• Display the Public Health Permit</li> <li>• Post a sign prohibiting vaginal and anal sex without a condom</li> <li>• Post a sign providing information on where to file a complaint with the Department</li> <li>• Sent letter from Dr. Fielding to known AFI producers</li> <li>• Created hotline number for questions and complaints</li> <li>• Developed an application process</li> <li>• Developed complaint guidelines</li> <li>• Established a mechanism with Film L.A. to approve film permit that require a PH Permit</li> </ul> <p><u>Ongoing Activities</u></p> <ul style="list-style-type: none"> <li>• Developing Regulations</li> <li>• Consulting with OSHA regarding the Bloodborne Pathogen Training and Exposure Control Plan requirements.</li> <li>• Developing a permit fee schedule</li> <li>• To date, received 5 applications for conditional permits</li> <li>• Conducted site visits to 2 of the locations</li> <li>• Approved 2 Film Permits electronically through the Film L.A. System</li> </ul>	

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<p><b>V.PHI REPORT CONTINUED</b></p>	<p><i>Commissioner Bholat asked for clarification of the protocol of how PHI looks for patients that are diagnosed with a communicable disease. Ms. Mercadel indicated that when a program, such as, TB Control, cannot locate a patient, PHI does a follow up to locate the patient, but PHI are not case managers.</i></p> <p><i>Commissioner Shindy asked what kind of compliance does DPH has with Adult Film Industry on what we can or cannot enforce. Ms. Mercadel indicated Dr. Fielding sent a letter to film producers requesting compliance, and PHI is in the process of developing regulations for those who are not in compliance.</i></p> <p><i>The Commission thanked Ms. Mercadel and staff for a comprehensive presentation.</i></p>	

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<p><b>VI. NEW BUSINESS</b></p>	<p>Angela Haley, Staff, proposed to the Commission (on the suggestion of Cindy Harding and staff) due to some DPH programs involvement with the Homeless TB Outbreak, such as, TB Control, ACDC, Immunization, and the SPAs, that the Commission only meet once a month from May through September until the TB crisis subsides.</p> <p><b>MOTION: PUBLIC HEALTH COMMISSION AGREED TO CONDUCT MEETINGS ONCE A MONTH FROM MAY SEPTEMBER</b></p> <p>Ms. Harding suggested that the Commission use the April 25<sup>th</sup> meeting to discuss what kind of issues the Commission wants to be involved with, such as, Health Care Reform, and other top issues that the Commission would like to focus on. The Commission agreed to use the April 25<sup>th</sup> meeting as a planning meeting for future Commission meetings.</p> <p>The meeting adjourned at 10:55 a.m.</p>	<p>Vice-Chairperson Champommier entertained a motion from Commissioner Shindy, seconded by Commissioner Bholat and carried unanimously.</p>