

COUNTY OF LOS ANGELES
 PUBLIC HEALTH COMMISSION
 June 27, 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

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
I. CALL TO ORDER	The meeting was called to order at approximately 10:19 a.m. by Chairperson Dowling at Central Health Center.	Information only.

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II. ANNOUNCEMENTS & INTRODUCTIONS	<i>Introductions of Commissioners and guests were conducted.</i>	<i>Information only.</i>
III. APPROVAL OF MINUTES	MOTION: APPROVAL OF APRIL 25, 2013 MINUTES	<i>Chairperson Dowling entertained a motion from Vice-Chairperson Champommier, seconded by Commissioner Bholat and carried unanimously.</i>

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<p>IV. PUBLIC HEALTH REPORT</p>	<p>Carrie Brumfield provided the Commission with a Public Health Report and discussed public health activities since the last report on May 23, 2013.</p> <p>Los Angeles County Commission on HIV</p> <p>At the most recent Joint Commission on HIV (Commission)/Prevention Planning Committee (PPC) meeting on June 13, 2013, Department of Health Services (DHS) representatives Dr. Amy Gutierrez and Tangerine Brigham informed the Commission and PPC of the prior week's court ruling against the County in AIDS Healthcare Foundation v. County of Los Angeles, et. al. The actions against DHS the consequent ruling, and the possible ramifications of that ruling are all causes of grave concern to both HIV planning bodies (Commission and PPC).</p> <p>Under Dr Katz' and Dr. Gutierrez' leadership, DHS was able to quickly develop a pharmacy network plan that resembled, if not exactly replicated, the ADAP pharmacy network in L.A. County. DHS leadership and staff thoughtfully and thoroughly structured a new pharmacy system through intensive hours, days and weeks of community engagement and dialogue, pharmacy and provider negotiations, and careful provider-level, and sometimes patient-level, planning.</p>	

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<p>IV. PUBLIC HEALTH REPORT CONTINUED</p>	<p>Report from the City of Los Angeles Office of the City Administrative Officer Regarding the City of Los Angeles Public Health Protection Act</p> <p>The report provides the CAO's preliminary analysis of annual operating costs for a City Public Health Department, which are estimated to be \$333 million. This figure is based on assuming that the City Department provides the full range of services the Department of Public Health (DPH) currently provides and is based on 40% of DPH's current budget. The cost estimate does not include start-up costs, the costs incurred by other City departments to provide services to the new Department, and the election-related costs due to placing the initiative on the ballot. The CAO's analysis differs from DPH's preliminary estimate for operating costs of a minimum of \$50 million. DPH's calculation was based on a percentage of DPH's annual net County costs rather than on DPH's overall budget.</p> <p>On June 19, 2013, the CAO will present this report to the City Council. Additionally, as indicated on the Council meeting agenda, the Council may recess to closed session to confer with legal counsel in order to discuss whether to initiate litigation relative to the ballot initiative.</p>	

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<p>IV. PUBLIC HEALTH REPORT CONTINUED</p>	<p>Contaminated Food Product/Hepatitis A Cases</p> <p><i>On Friday, May 31, 2013, DPH was notified of a contaminated food product that was tied to cases of Hepatitis A. "Townsend Farms Organic Antioxidant Blend" frozen berry and pomegranate mix sold at Costco has been identified to be the contaminated source that has resulted in some people contracting Hepatitis A. To date, a total of 87 cases of Hepatitis A resulting from consumption of the contaminated food product have been identified in the U.S. In California, there are 33 cases, with 11 cases hospitalized. To date, there have been no deaths. In L.A. County, six cases have been confirmed, with one suspect case. Three of the confirmed six cases have been or are currently hospitalized.</i></p> <p><i>DPH is continuing to conduct surveillance and work with the medical community to identify any additional cases. Additionally, DPH will continue to work with the State and federal agencies to monitor this situation and respond as necessary.</i></p> <p>Medication Assisted Treatment (Vivitrol)</p> <p><i>DPH continues to partner with other organizations to increase the availability of Vivitrol for L.A. County residents. DPH has partnered with DMH and the Sheriff's Department to develop a Vivitrol project for Assembly Bill 109 Co-Occurring Disorders (COD) Postrelease Supervised Persons (PSPs)</i></p>	

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<p>V. L.A. COUNTY IMMUNIZATION PROGRAM (LACIP)</p>	<p>Dr. Michelle Parra, provided the Commission with an update of the activities within L.A. County Immunization Program (LACIP).</p> <p>Immunizations are one of the most important public health achievements of the last century and provision of immunizations will continue to be one of the most important public health activities of this century.</p> <p>Strategic Goals</p> <p><u>Goal 1: Ensure Access to Immunization Services</u></p> <p>Ensure that immunization services are accessible to all people, across the lifespan, in L.A. Count.</p> <p><u>Goal 1 Objectives:</u></p> <ul style="list-style-type: none"> • Interventions that increase access to perinatal hepatitis B services • Programs that encourage provider participation in national, state and local programs that support no-cost and low-cost vaccines. • Collaborative strategies for promoting adolescent and adult immunizations • Coordinated efforts to identify and address barriers to access 	

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<p>V. LACIP CONTINUED</p>	<p><u>Goal 2: Provide Access to Appropriate Immunization Information</u></p> <p>Ensure that all residents and stakeholders in Los Angeles County (LAC) have accurate and timely immunization and VFD information.</p> <p><u>Goal 2 Objectives</u></p> <ul style="list-style-type: none"> • Use the best available research and resources to develop and disseminate culturally appropriate educational materials • Strengthen collaborative partnerships to build trust with the community • Conduct outreach and education • Promote positive immunization policy <p><u>Goal 3: Ensure Effective Service Delivery</u></p> <p>Ensure that the delivery of immunization services is consistent with current standards and immunization practices.</p> <p><u>Goal 3 Objectives</u></p> <ul style="list-style-type: none"> • Provide technical assistance to support the use of effective practices in health care provider offices 	

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<p>V. LACIP CONTINUED</p>	<ul style="list-style-type: none"> • Encourage participation in a web-based regional immunization registry • Monitor adherence to recommended standards and practices • Ensure that LACIP training curricula and materials reflect evidenced-based recommendations <p><u>Goal 4: Monitor Disease</u></p> <p>Ensure that an effective system is in place to prevent, detect and control VFD morbidity and mortality in LAC.</p> <p><u>Goal 5: Build Organizational Capacity</u></p> <p>Ensure that an effective workforce and support systems are in place to help us achieve our mission.</p> <p><u>Goal 5 Objectives</u></p> <ul style="list-style-type: none"> • Maintain information systems and infrastructure that support Program goals • Support training that enhances staff skills, knowledge and effectiveness • Promote an effective and positive work environment 	

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V.LACIP CONTINUED	<p><u>Goal 6: Utilize and Expand the Evidence-based</u> Use and promote evidence-based practices for improving immunization rates.</p> <p><u>Goal 6 Objectives</u></p> <ul style="list-style-type: none"> • Ensure that interventions, projects, and studies are consistent with evidence-based practices, advisory boards, and best practices • Use program evaluation and performance principles to test and identify practices • Disseminate findings and promote evidenced-based and promising practices <p><u>Measuring Progress</u></p> <p>Dr. Parra discussed the following data and slides:</p> <ul style="list-style-type: none"> • Childhood Immunization Rates • Adult Immunization Rates • Availability of Vaccine by Medical Specialty • Percentage of Case Managed Clients Receiving Recommended Prophylaxes • Adherence to Standards of Immunization Practices • Percentage of Health Professionals who Demonstrate Knowledge of Recommendations 	

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<p>V.LACIP CONTINUED</p>	<p><u>Assessing Barriers to Adult Immunization</u></p> <ul style="list-style-type: none"> • Partnership between LAC DPH, the Immunization Coalition of LAC, and the CMA Foundation (CMAF) • Web-based survey of CMAF member physicians to assess adult vaccination practices <p>Policy Update</p> <p><u>Recently Enacted Legislation AB 354</u></p> <ul style="list-style-type: none"> • Changed the California Health and Safety Code to require students to provide proof of a pertussis booster (Tdap) shot to enter school • LAC Board of Supervisors supported passage because: school laws are effective and pertussis can be deadly. <p><u>Recently Enacted Legislation AB 2109</u></p> <ul style="list-style-type: none"> • Creates a system to provide parents/guardians considering a Personal Beliefs Exemption with accurate information to help them make a more informed decision. 	

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V.LACIP CONTINUED	<ul style="list-style-type: none"> Parents/Guardians must submit a written statement from a provider that they received information about VPD risks and vaccine risks and benefits. <p><u>...A Surprise</u></p> <ul style="list-style-type: none"> Governor Brown's signing letter directed CDPH to: Oversee implementation in a fashion that does not overly burden parents Allow for a separate religious exemption Supporters may approach the Governor to discuss a reversal of the religious exemption. <p><u>Recently Enacted Legislation...AB 2009</u></p> <ul style="list-style-type: none"> Eliminated the requirement to prioritize individuals older than 60 years of age for CDPH purchased flu vaccine. Removes requirement that state-purchased vaccine be administered by a physician, RN, or LVN. Goes into effect for the 2013-2014 flu season <p><u>Failed Legislation in 2012</u></p> <ul style="list-style-type: none"> SB 1318: Mandated Measures to Prevent the Spread of Flu in Healthcare Settings 	

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<p>V.LACIP CONTINUED</p>	<ul style="list-style-type: none"> • <i>AB 2064: Would Have Set Reimbursement Standards for Childhood Immunization</i> <p>Controlling Vaccine Preventable Diseases (VPDs)</p> <p><u>Goal 4: Monitor Disease</u></p> <p><i>Ensure that an effective system is in place to prevent, detect and control VPD morbidity and mortality in LAC.</i></p> <p><u>Goal 4 Objectives</u></p> <ul style="list-style-type: none"> • <i>Evaluate policies and procedures to ensure adherence to local, state, and nationally-developed standards</i> • <i>Maintain internal QI efforts that ensure use of efficient disease monitoring procedures</i> • <i>Improve adherence to adverse event reporting requirements</i> • <i>Monitor trends to identify areas of increased VPD morbidity and mortality</i> • <i>Provide timely and effective communication to external stakeholders regarding VPDs and reporting requirements</i> 	

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<p>V. LACIP CONTINUED</p>	<p>Dr. Parra discussed the following graphs and data:</p> <ul style="list-style-type: none"> • Mumps Cases, LAC • Measles Cases, LAC • Pertussis Cases, LAC • Rubella (Acute) Cases, LAC • Rubella (Congenital) Cases, LAC • Varicella Outbreaks, LAC • International Outbreaks: Rubella • International Outbreaks: Measles • Progress Made Toward Eradicating Polio • HPV Vaccine Impact – Have a chance to eliminate 89 percent of HPV if teens would get HPV Vaccine. <p>Commissioner Bholat asked in regards to hepatitis A and B vaccine, who determines who will receive it, such as, clinic, pharmacist, or physician. DPH should have dialogue with Medicare and managed care. Dr. Parra indicated the level to which one can be reimbursed has increased, and it's all political.</p> <p>Chairperson Dowling asked what is DPH going to do when the Affordable Care Act comes into effect in October 2013, if federal programs are cutting funds and there are no funds available. Dr. Parra</p>	

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<p>V. LACIP CONTINUED</p>	<p><i>indicated 317 funding could be decreased, and LACIP hasn't heard one way or the other if that's true. DPH now charge for vaccines.</i></p> <p><i>The Commission thanked Drs. Parra and Nelson for a comprehensive presentation.</i></p> <p><i>The meeting adjourned at 11:47 a.m.</i></p>	