

#### **COMMISSIONERS**

Michelle Ann Bholat, M.D., M.P.H., Chairperson\*

Patrick Dowling, M.D., M.P.H., Vice-Chair\*

Jean G. Champommier, Ph.D.\*

Crystal D. Crawford, J.D.\*\*

Arnold Steinberg, M.B.A.\*\*

#### **DEPARTMENT OF PUBLIC HEALTH REPRESENTATIVE**

Dr. Jeffrey Gunzenhauser, Interim Medical Director\*\*

Sara S. Guizar, Secretary\* Public Health Commission

#### **PUBLIC HEALTH COMMISSION ADVISORS**

Cynthia Harding, Interim Director\*\*
Carrie Brumfield, Chief of Staff\*

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

	TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
<u>L</u>	Call to Order	The meeting was called to order at approximately 10:35 a.m. by Chairperson Bholat, at the Central Public Health Center.	Information only.
<u>II.</u>	Announcements and Introductions	Introduction of Commissioners and guests were conducted.	Information only.
<u>III.</u>	Approval of Minutes	MOTION: APPROVAL OF MINUTES FOR JUNE 9, 2016.	Commissioner Dowling entertained a motion to approve the meeting minutes for (June 9, 2016). The motion was seconded by Commissioner Champommier, all in favor.
IV.	<u>Public Health</u> <u>Report</u>	Carrie Brumfield, Chief of Staff Department of Public Health (DPH), provided the Commission with the Public Health Report and discussed PH activities.  The Need for a Public Health Approach to Marijuana Policy/Marijuana	
		Ms. Brumfield provided the Commission with information on the Substance Abuse Prevention and Control (SAPC's) report on the Approach to Marijuana Policy and Taxation:	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
	<ul> <li>California's voting initiative to legalize the use of recreational marijuana will take place in November 2016         <ul> <li>Adult Use of Marijuana Act (AUMA)</li> </ul> </li> <li>Strategic tax policies         <ul> <li>Support goals to minimize the cost of marijuana use and abuse in communities</li> <li>Increase marijuana and other substance abuse education, prevention, and treatment</li> <li>Raise funds to address homelessness and other issues associated with substance abuse</li> </ul> </li> <li>Commission Chair Bholat informed the Commission about a research team at the University of California San Diego (UCSD) on the use of medical marijuana.</li> </ul>	
	She asked if DPH had any communication or collaboration with UCSD's research team.  Invasive Meningococcal Disease (IMD) in Los Angeles County (LAC)	
	Ms. Brumfield informed the Commission with news regarding IMD in LAC. She stated DPH released a public health alert on an IMD outbreak in LAC:  • Seven (7) IMD cases among MSM in LAC  • DPH was directed by the Board to work with DHS  • Report back to the Board on a plan  • DPH continues to work closely with CDPH, CDC, and health departments to promote education and awareness  • Increase the ease and availability of vaccination	
	Commission Chair Bholat asked DPH if the IMD vaccine would be available to anyone.	
	Ms. Brumfield stated the focus is on the MSM population. She stated people are also referred to DHS clinics offering the IMD vaccination.	
	Vice Chair Dowling asked DPH if anyone from the public would be able to walk into the DHS clinics for vaccinations.	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/
		FOLLOW-UP
	Update on DPH Oversight of Court-Ordered Interior Cleaning of Homes in Porter Ranch	
	Update on the court-ordered progress of the interior cleaning of homes in Porter Ranch – (DPH's efforts):  • DPH continues to work closely with Southern California Gas Company  • Oversight of cleanings provided by DPH  • Field observations by trained Environmental Health (EH) staff  • Review of cleaning deficiencies reported by residents  • Expert review of field practices	
	Los Angeles County Tuberculosis Data 2015	
	Summary report on tuberculosis (TB) cases from 2015 in LAC:  • 606 new TB cases were reported in LAC  • 80% of TB cases are among individuals born outside the United States  • 1% of TB cases among children ages 0 to 4 years  • 32% of TB cases among older adults 65+  • 7% of TB cases among the homeless	
	Commission Chair Bholat asked about the requirements for TB testing.	
	Trauma Prevention Initiative Spending Plan	
	DPH and DHS were directed by the Board to develop/implement a Trauma prevention initiative in regions of the County that experience a disproportionate high incidence of trauma:  • Report back to the Board on a proposed spending plan  • Hire community intervention staff to assist gang-involved and at-risk youth  • Initiative plan prioritizing efforts in South Los Angeles  • Highest burden of violence-related trauma visits, injuries, and deaths	
	<ul> <li>Expansion of the Parks After Dark (PAD) program in eight (8) other parks across the County</li> <li>Total of 21 parks with PAD programming by end of 2016</li> </ul>	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
	Commissioner Champommier expressed his concern about parks on the Eastside of Los Angeles, and the safety of staff as well.	
	Water Quality Monitoring of Small Water Systems	
	DPH was directed by the Board to provide quarterly reports on its water quality monitoring of public water systems:  • Summarize water quality findings in public water systems throughout the LAC (Outline actions taken by EH)	
	Commission Chair Bholat asked about DPH's timeline for bacteriological analyses violations in the public water systems.	
	Food Facility Grading System	
	Ms. Brumfield informed the Commission about a new draft grading card with an area for inspectors to date and initial. She stated that the new grading card will be displayed in January 2016.	
	Multi-Departmental Medi-Cal Outreach and Enrollment Grant	
	DPH Maternal Child and Adolescent Health (MCAH) Programs is the lead Division:  Conduct outreach and enroll residents newly eligible for Medi-Cal Reach and assist specific hard-to-reach uninsured populations	
	Ms. Brumfield stated DPH works with several County departments to provide updates on the implementation of the multi-Departmental Medi-Cal Outreach Grant.	
	Commission Chair Bholat asked for a clarification on the funds awarded, and the total target numbers for Redetermination Assistance.	
	Commission Chair Bholat thanked Ms. Brumfield for her presentation.	

	TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
<u>V.</u>	Presentation: Opioid Misuse and Abuse – CDC Guidelines, and Safe Med LA	Gary Tsai, Medical Director and Science Officer of Substance Abuse Prevention and Control (SAPC) Program, provided the Commission with an update on Opioid Misuse and Abuse.  Dr. Tsai thanked the commission for the opportunity to present on the following topics:  • Opioid Epidemic – Framing the Issue • Centers for Disease Control and Prevention (CDC) Guidelines • Introduction to Safe Med LA – Countywide Prescription Drug Abuse Coalition  OPIOID – FRAMING THE ISSUE (SCOPE OF THE OPIOID EPIDEMIC)  Opioid Use on a Global Scale:  • World Population - 5% comprised by the United States globally  • Global Opioids - 80% of Opioid use in the U.S.  • Hydrocodone - 99% use in the U.S.  Prescription Drugs – Driving the National Drug Overdose Epidemic:  • Drug overdose deaths, motor vehicle injury, and firearm injury deaths  Dr. Tsai stated that the large contributing reason for motor vehicle and firearm injury deaths is prescription drug abuse.  ED Visits and Hospitalizations in Los Angeles County (LAC), 2005-2014:  • Rx Opioid and Heroin-related  Dr. Tsai stated there has been an increase in opioid and heroin-related Emergency Department (ED) visits and hospitalizations related to these substances. He stated DPH monitors these closely.  Opioid Related Deaths in LAC:  • 2006 – 469, 2008 – 424, 2010 - 360  Opioid Related Deaths - Most common in other parts of the Country:	FOLLOW-UP
		East Coast and in the South	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/
		FOLLOW-UP
	Rate of ED Visits by Race and Gender in LAC:  • Rx Opioid-related – higher rates of opioid related ED visits  • White men and women/Black men and women  • Heroin-related – higher rates of Heroin related ED visits than other ethnic groups – (White men and women)	
	Prescriptions Filled in LAC – Filled prescriptions in LAC have not changed since 2012:  • Opioids/Sedatives  • Opioids comprise the majority of prescriptions in LAC  • Oxycodone  • Primary opioid prescribed in other areas of the Country	
	Dr. Tsai stated that 25% of LAC prescribers wrote 91% of opioid prescriptions.  CDC GUIDELINES FOR PRESCRIBING OPIOIDS FOR CHRONIC PAIN	
	Centers for Disease Control and Prevention:  Provides recommendations about the appropriate prescribing of opioid pain relievers and other treatment options to improve pain management and patient safety	
	Goals of CDC Opioid Guidelines – Key Goals:  • Improve communication between providers and patients about the risks and benefits of opioid therapy for chronic pain  • Improve the safety and effectiveness of pain treatment, and reduce the risks associated with long-term opioid therapy  • Exceptions to guidelines  - Guidelines do not pertain to patients in Active Cancer Treatment, Palliative Care, and End-of-Life Care	
	Recommendations of CDC Guidelines: <ul> <li>First-line treatment for chronic pain (use non-opioid alternatives)</li> <li>Establish and measure goals for pain and functioning</li> <li>Discuss with patients the benefits, risks, and the availability of non-opioid alternatives</li> </ul>	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
	<ul> <li>Use immediate-release opioids, as opposed to long-acting opioids</li> <li>Prescribe the lowest effective dose and increase dose cautiously</li> </ul>	
	SAFE MED LA	
	Safe Med LA - A broad public/private cross-sector coalition that is taking a coordinated and multi-pronged approach to comprehensively address prescription drug abuse In LAC:  • Core Rationale  • Organize and coordinate various concurrent projects that involve prescription drug abuse into a unified effort  - LAC Prescription Drug Abuse Medical Task Force  - LA Overdose Prevention Task Force  - DHS Pain Management Workgroup  - Safe Drug Drop-Off Boxes at 21 LASD Stations in LAC  • Blanket approach - Address complex problems along the full continuum of interventions	
	Coalition Members:  Cross-sector, public-private representation  County Departments (DHS, DMH, DPH, DPW, Sheriff's etc.)  Health Plans (LA Care, Health Net, Kaiser Permanente, etc.)  Healthcare Organizations (Community Clinic Association of LAC, LAC Medical Association, Hospital Association of LAC, LA Dental Society, Health Services Advisory Group, etc.)  Health Providers (LAC DHS, UCLA Health System, KP, HealthCare Partners, LA LGBT Center, Exer Urgent Care, etc.)  Behavioral Health Providers (Tarzana Treatment Centers, Behavioral Health Services, Prototypes, JWCH Institute, etc.)  Others (Pharmacist Associations, City of Long Beach, City of Pasadena, etc.)	
	Save Med LA – Strategic Plan Guiding Efforts:  • Five-year strategic plan guides - The work of Safe Med LA  • Overall goal - Decrease prescription drug abuse deaths in LAC  by 20%	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
	<ul> <li>9-6-10 Approach - 9 Action Teams, 6 priority areas, 10 key objectives</li> </ul>	
	Save Med LA Coalition Action Teams - (Focus on Safe Prescribing):  • Safe prescribing Pharmacy practice action team/Medical Practice  • Medication-Assisted addiction treatment  • Ensure access to other drugs  • Safe drug disposal - (Offered thru Sheriff's stations)  • Law enforcement action team – Enforce/ensure access to Naloxone  • Opioid overdose prevention medication  • CURE action team (California prescription drug monitoring)  • Ensure prescribers register for CURE  • Community education action team  • Outreach to communities through SAPC providers	
	Six (6) Priority Areas:  I. Education and Training  Output  Ou	
	Treatment and Overdose Prevention     Expand access to medication-assisted treatment for individuals addicted to prescription drugs	
	<ul> <li>Expand access to naloxone for overdose prevention</li> <li>III. Tracking, Monitoring, and Data Exchange</li> <li>Promote increased utilization of the statewide prescription drug monitor program (PDMP) in California</li> </ul>	
	IV. Safe Drug Disposal  Support convenient, safe, and environmentally responsible prescription drug disposal programs in LAC free to the public	
	V. Enforcement  Collaborate with law enforcement to identify and address improper practices that threaten public health	
	VI. Community Trends and Policy  Seize opportunities to positively influence policy, at the local as well as State and Federal levels	

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/
VI. Adjournment	Progress and Takeaways from Safe Med LA Thus far – Progress:  Implement safe prescribing guidelines at all emergency departments Expand access to naloxone and medication-assisted treatment Activate substance use prevention providers to develop strategies to provide community engagement tailored to their unique communities Progress of safe drug disposal efforts Engage law enforcement around safe drug disposal and naloxone access for officers  Misuse and abuse of opioids is one of the fastest growing public health issues confronting American communities – Summary: The opioid epidemic is a complex, multifaceted, community-wide problem that will require a similarly comprehensive solution Safe Med LA - A broad, cross-sector coalition of public and private partners who take a multipronged and coordinated approach to address prescription drug abuse in LA County 9-6-10 Approach Nine (9) action teams focusing on different aspects of the prescription drug abuse epidemic Key Goal - Reduce prescription drug abuse deaths in LAC by 20% by 2020  Vice Chair Dowling asked about any movement with Suboxone drug.  Dr. Tsai stated Suboxone drug is a combination for Buprenorphine and Naloxone. He stated LA Care works with DPH to convene a Buprenorphine waiver training – (training provides physicians the ability to prescribe opioids).  Commission Chair Bholat thanked SAPC (Dr. Tsai) for the presentation.	FOLLOW-UP