APPROVED 9/8/16

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.*

PUBLIC HEALTH COMMISSION ADVISORS

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

*Present **Excused ***Absent

DEPARTMENT OF PUBLIC HEALTH REPRESENTATIVE

Dr. Jeffrey Gunzenhauser, Interim Medical Director**

Sara S. Guizar, Secretary* Public Health Commission

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ΤΟΡΙϹ	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
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.
Announcements and Introductions	Introduction of Commissioners and guests were conducted.	Information only.
Approval of Minutes	MOTION: APPROVAL OF MINUTES FOR JULY 14, 2016.	Commissioner Dowling entertained a motion to approve the meeting minutes for (July 14, 2016). The motion was seconded by Commissioner Champommier, all in favor.
Public Health	Carrie Brumfield, Chief of Staff Department of Public Health (DPH), provided the	
<u>Report</u>	Commission with the Public Health (PH) Report and discussed PH activities.	
	Anti-Obesity Initiative Targets Less "Screen Time" for Young Children	
	Ms. Brumfield informed the Commission about DPH's launching campaign	
/ á	Call to Order Announcements and Introductions Approval of Minutes Public Health	Call to OrderThe meeting was called to order at approximately 10:35 a.m. by Chairperson Bholat, at the Central Public Health Center.Announcements and IntroductionsIntroduction of Commissioners and guests were conducted.Approval of MinutesMOTION: APPROVAL OF MINUTES FOR JULY 14, 2016.Public Health ReportCarrie Brumfield, Chief of Staff Department of Public Health (DPH), provided the Commission with the Public Health (PH) Report and discussed PH activities.Anti-Obesity Initiative Targets Less "Screen Time" for Young Children

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<u>V.</u> <u>Presentation:</u> <u>Violence Prevention</u> <u>in Los Angeles</u> <u>County</u>	 to reduce childhood obesity rates in LAC. Studies showed that children are sitting for an average of seven hours a day (lacking more physical activity). Ms. Brumfield also stated the campaign was designed to empower parents, caregivers, and children to become more active. Public Health Cautions Pregnant Women on Travels to Zika-Affected Areas Ms. Brumfield stated DPH continues reminding pregnant women intending to travel to Zika-affected areas, to exercise caution. She stated the Centers for Disease Control and Prevention issued a travel alert informing people traveling to areas with Zika virus transmission to take strict precautions to prevent being bitten by mosquitoes. Tony Kuo, Acting Director Chronic Disease and Injury Prevention (CDIP), provided the Commission with an update on Violence in Los Angeles County (LAC). Breaking The Cycle Of Violence Dr. Kuo stated violence related problems is one of the hardest issues in the Emergency Room (ER). He stated DPH's vision is to break the cycle of violence, get individuals back to recovery, and prevent people from becoming part of the cycle: At the personal level Work with law enforcement departments to build up diversion programing At the community level Build up social support in order to reduce/prevent violence in communities - Parks After Dark (PAD) At the individual level Connect violence related trauma individuals in the ER and provide social services needed 	

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		FOLLOW-UP
	Scaling and Spreading Evidence-Based Juvenile Justice System Diversion - Relationship Between Juvenile Justice and Health	
	 Dr. Gase of CDIP stated that contact with the juvenile justice system can lead to a range of poor health and social outcomes such as increase risk for mental health and substance abuse, involvement in violence, and exposure to infectious diseases: Decrease in education, family functioning, and employment opportunities 	
	Opportunities for Juvenile Justice System Diversion	
	Opportunities for law enforcement diversion is needed in diverting individuals into community-based organization programs.	
	Advancing Evidence-Based Juvenile Justice Diversion	
	 DPH provides leadership and works closely with the Juvenile Court: Active engagement from County departments, law enforcement, schools, and community-based organizations Supports LAC's My Brother's Keeper (MBK) 	
	Key Accomplishment: Environmental Scan	
	 Led by community-based organizations, schools districts, and law enforcement agencies to support the scale and spread of effective program models: Advance evidence-based assessment and identify the needs/risk of referred youth 	
	Convening of Practitioners (Making Diversion Work)	
	 Three (3) goals heavily driven by the environmental scan: Share evidence-based models, risk and needs assessment/evaluation Facilitate networking and peer-to-peer learning Diverse group of 75+ practitioners and researchers 	

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	Moving Forward	
	 DPH currently works with the Countywide criminal justice coordinating council, office of diversion and reentry, and MBK's workgroup: Work toward advancing a comprehensive model for juvenile diversion Provide technical assistance/identify evaluating promising programs Work with providers to help induce more enhanced evaluations 	
	Value of a Public Health Approach	
	Dr. Gase stated DPH plays a leadership role in bringing a population health lens and focus on root causes to ground efforts in an applied data-driven framework that emphasizes continuous quality improvement. She also stated DPH's interest along with diversion practitioners, is to advance a restorative justice to bring together those who have been impacted by the offence, as well as the offender.	
	Trauma Prevention Initiative	
	Dr. Welsing provided the Commission with information on Violent Deaths in LAC. She indicated in year 2012 over 1400 people in LAC lost their lives to violence. She stated about 700 deaths were suicides, 600 were homicide/legal intervention, and about 4% were undetermined intent.	
	Homicide Rates Among 15-24 Year Old Males in LAC by Race/Ethnicity	
	 Homicide rates among 15-24 year old males in LAC have declined in the past ten (10) years. DPH actively works on efforts to reduce these disparities: Second leading cause of premature death in LAC Incredible disparities in African Americans Higher rates of Hispanic Latinos in LAC than Caucasians 	
	Measuring the Problem/A Public Health Approach to Violence	
	Dr. Welsing indicated that more hospitalizations and emergency visits occur for every death/homicide. She expressed the need to define characteristics of target populations, and identify risks and protective factors.	

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	National Violent Death Reporting System	
	DPH has participated in the violent death reporting system since 2000. The national surveillance system collects detailed circumstance data on all violent deaths:	
	Coroner reports, death certificates, and law enforcement reports	
	Parks after Dark (PAD)/Participation and Reach – PAD Decreased Violence	
	 The PAD program began in 2010. PAD is an effective model at decreasing violent crime with significant outcomes: Collaborative effort in partnership with DPH and other County agencies Provide evaluation and strategic support Nine (9) PAD sites in 2015 to 21 PAD sites in 2016 Includes four (4) PAD sites in South Los Angeles A decrease in serious and violent crime in three (3) regional PAD parks between 2009 and 2013 	
	Trauma Prevention Initiative – South Los Angeles (South LA) and Countywide Strategies	
	 The Trauma Prevention Initiative was funded by DHS in December 2015. The Initiative was design to reduce the number of trauma related visits in hot spot areas of LAC: Work with existing programs and find ways to better coordinate and connect injury prevention programs/practices across trauma centers Focus on reducing violence related trauma visits in South LA Ensure safe passages to and from schools and parks 	
	Commissioner Champommier expressed his interest in the PAD program, services provided for youth involved in violence, and the importance of community engagement for a range of problems that families experience.	
	Commission Vice Chair Dowling asked about PAD and its involvement with obesity prevention programs for ages 0-17, recreational activities, and in reaching the young girls/female population.	

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		Dr. Welsing stated PAD offers a variety of recreational activities for young kids, young adults, and both male/female populations.	
		Commission Chair Bholat requested a future presentation from CDIP be scheduled in 2017 to discuss the progress of the PAD programs.	
		Commission Chair Bholat thanked CDIP for their presentation.	
<u>VI.</u>	Public Comment	Ms. Lolita Namocatcat of the Asian Pacific Counseling and Treatment Center (APCTC) provided the Commission with information on services provided by APCTC.	
		 Ms. Namocatcat stated APCTC offers a variety of programs which include: Transitional age youth family intervention with counseling 	
		 Full service partnership dealing with incarcerated clients Professional intervention Case management and therapy 	
		Older Adult System - Wellness Group	
		Ms. Namocatcat stated APCTC witnesses a great deal of violence in homeless and mentally ill individuals. She expressed the need for new buildings/centers for the homeless, and the need to reduce violence in the community.	
<u>VII.</u>	<u>Adjournment</u>	The meeting adjourned at approximately at 11:56 a.m.	