

#### **COMMISSIONERS**

Patrick Dowling, M.D., M.P.H., Chairperson\* Jean G. Champommier, Ph.D., Vice-Chair \* Crystal D. Crawford, J.D.\*

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

Dr. Jeffrey Gunzenhauser, Medical Director\*

Sara Guizar, Secretary\* Public Health Commission

#### PUBLIC HEALTH COMMISSION ADVISORS

Cynthia Harding, Interim Director\*\* Heather Northover, Acting Chief of Staff\*

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

	ΤΟΡΙϹ	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
<u>I.</u>	<u>Call to Order</u>	The meeting was called to order at 10:38 a.m. by Chairperson Dowling, at the Central Public Health Center.	Information only.
<u>II.</u>	<u>Announcements and</u> Introductions	Introduction of Commissioners and guests were conducted.	Information only.
<u>III.</u>	<u>Approval of Minutes</u>	MOTION: APPROVAL OF MINUTES FOR NOVERMBER 13, 2016 MOTION: APPROVAL OF MINUTES FOR DECEMBER 10, 2016	Commissioner Crawford entertained a motion to approve the meeting minutes for (November 2016, and December 2016). The motion was seconded by Commissioner Champommier, all in favor.
<u>IV.</u>	<u>Public Health</u> <u>Report</u>	Heather Northover, Acting Chief of Staff Office of the Chief Deputy Director/ Department of Public Health (DPH), provided the Commission with the Public Health Report and discussed Public Health (PH) activities.	
		Ms. Northover provided the Commission with information regarding the appointment for Doctor Barbara Ferrer, to serve as Director of the Department of	

Public Health for the County of Los Angeles. She stated Dr. Ferrer's effective date as Director of DPH was February 6, 2017.         Health Officer Order for Reporting of Carbapenem-Resistant Enterobacteriaceae and Antimicrobial Resistance         Ms. Northover stated that on January 2017, DPH issued a letter to the Board of Supervisors (Board) about the issuance of a health officer order requiring reporting of Carbapenem-Resistant Enterobacteriaceae (CRE) infections by all Los Angeles County (LAC) Hospitals and Skilled Nursing Facilities. DPH notified each facility of the requirement to submit annual antibiogram documenting drug-resistance for CRE and other bacterial pathogens.         Controlling Illegal Trafficking and Use of Synthetic Opioids         Ms. Northover stated DPH was instructed by the Board to report back on the control of synthetic opioids, sulnerable populations associated with these synthetic opioids, and educational opportunities to inform youth and the general public about the dangers of synthetic opioids.         Key Indicators of Health         In late January 2017, DPH issued two publications highlighting disparities by ethnicity and povery level:         • Key indicators of health by service planning area         • Health Indicators for Women in LAC         Update of the Health Facilities Inspection Division (HFID) Contract with the California Department of Public Health (CDPH) Licensing and Certification Program (LCP)		
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Ms. Northover informed the Commission that HFID is charged with licensing.	California Department of Public Health (CDPH) Licensing and Certification	
certifying, and inspecting health care facilities in California. She stated DPH has completed their one year of the contract with CDPH and has exceeded all of the deliverables for this contract.	completed their one year of the contract with CDPH and has exceeded all of the	

Report Back on Vision Zero Motion	
The Board approved a motion instructing DPH and the Department of Public Works (DPW), in collaboration with other County departments, to implement/recommended strategies and actions, establish a Steering Committee to implement an initiative, and develop an action plan for unincorporated areas in LAC.	
Update on Addressing Health Needs of Residents in the Communities Near Exide Technologies – Former Battery Recycling Facility in Vernon, CA	
Ms. Northover provided the Board with an update on Health Agency actions in response to issues related to Exide Technologies (Exide), and address both the public and personal health needs of the residents.	
Update on Progress to Abate Elevated Hexavalent Chromium Levels in the City of Paramount	
DPH was instructed by the Board to report back on the progress of Chromium-6 emissions in the City of Paramount. DPH provided information on air quality monitoring, soil assessment, and enforcement for the Chromium-6 emissions standard in the City of Paramount, as well as provide ongoing public education and communication.	
Update on Proposed Permit Expansion of Quemetco, Inc., Lead Smelting Facility ("Quemetco")	
Ms. Northover informed the Commission that DPH works with the California Department of Toxic Substances Control (DTSC) to ensure Quemetco, Inc., is in compliance with current permitting and corrective action requirements. Quemetco is the sole remaining battery recycling and lead smelting facility in California after the closure of the Exide Facility in Vernon.	
Ms. Northover notified the Commission that DPH has officially been awarded national accreditation through the Public Health Accreditation Board.	

<u>V.</u>	<u>Presentation:</u> Hepatitis C	Dr. Robert Kim-Farley, Medical Director Acute Communicable Disease and Control (ACDC) Program, and Dr. Hal Yee, Medical Director of the Department	
	Treatment Protocols	of Health Services (DHS), provided the Commission with an update on Hepatitis	
	– Public Health	C Treatment Protocols in LAC.	
	Programs and Plans		
	<u> </u>	Background on Hepatitis C	
		Dr. Kim Farley provided the Commission with information regarding the background of Hepatitis C and the current program activities within DPH- ACDC.	
		Natural History of Hepatitis C	
		Dr. Kim-Farley stated that 20 to 30 percent of people experience symptoms of	
		Hepatitis C. Although people may have symptoms of Hepatitis C infection, they	
		may not be aware about it:	
		<ul> <li>Chronic Hepatitis C is the leading cause of end stage liver disease and liver related deaths in the U.S.</li> </ul>	
		<ul> <li>Treatment with Sustained Virologic Response (SVR) improves outcomes</li> </ul>	
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		Chronic Hepatitis C in LAC	
		ACDC estimated about 153,000 people have Chronic Hepatitis C in LAC. The number prevalence in general population and high risk groups and size of the Hepatitis C Virus (HCV):	
		Homeless, HIV infected, Incarcerated, and Residential Drug or Alcohol     Treatment	
		HCV Cascade of Care: British Columbia - HCV Diagnosed Before 12/31/12	
		Available data from British Columbia (about 73,000 infected). ACDC stated that the numbers mentioned would be different today with proper use of new drugs/medication:	
		• 14,000 were not aware of their infection, about 40,000 people get actually tested, 8,500 get treated, and 5,000 get cured	
		Cascade at an Urban Post-incarceration Clinic	
		Dr. Kim-Farley informed the Commission of a major drop in the correctional system after incarceration. A concern on the numbers of screened inmates;	

those tested for having Chronic Hepatitis C, those referred to a specialist, those who saw a specialist, and those who initiated/completed treatment.	
Challenges in Hepatitis C Care	
<ul> <li>Lack of awareness and symptomatic infection reduce motivation to get tested:</li> <li>Behavioral, social (stigma) and structural barriers to receipt of care for high risk populations</li> <li>Limited specialist availability and high cost of medications</li> </ul>	
Insurance Status of Persons with Hepatitis C - 2013	
<ul> <li>Dr. Kim-Farley stated most people with Undiagnosed HCV have no insurance.</li> <li>He also stated many undiagnosed that actually have no insurance end up in the public system:</li> <li>Number of lives with HCV diagnosed and undiagnosed - 800,000</li> </ul>	
DPH Programs Engaged with Hepatitis C	
<ul> <li>Viral Hepatitis Prevention Coordinator/ACDC and HIV/STD Programs</li> <li>Public Health Laboratory - Testing patient specimens</li> <li>SAPC - Promoting HCV testing for persons with substance abuse</li> </ul>	
DPH Hepatitis C Surveillance (1) and (2)	
<ul> <li>Medical providers report cases electronically, or by phone/fax:</li> <li>Electronic lab reports of serology, nucleic acid tests/viral load</li> <li>Acute Hepatitis C – Defined by positive lab test and acute symptoms</li> <li>Chronic Hepatitis C - Defined by lab report</li> </ul>	
Viral Hepatitis Prevention Coordinator (VHPC) Goals	
<ul> <li>Advise DPH leadership on VHP and control:</li> <li>Provide technical assistance to community-based organizations to integrate and improve hepatitis education, screening, and linkage</li> <li>Identify engage community stakeholders in Hepatitis prevention</li> </ul>	

DPH Hepatitis Advisory Committee (HAC)	
<ul> <li>HAC is comprised of DPH and Health Agency partners that provide viral hepatitis services, and other activities throughout LAC:</li> <li>Provides general education to the community and those with Hepatitis C</li> <li>Conducts monthly meetings and annual conferences</li> </ul>	
VHPC Engagement with Hepatitis C Task Force	
Dr. Kim-Farley stated the Hepatitis C Task Force includes private and public agencies, advocates, and concerned individuals working to prevent the spread of hepatitis C and other viral hepatitis.	
2017-21 Adult Viral Hepatitis Prevention Strategic Plan	
DPH is in the process of developing a new integrated reporting and information surveillance system for DPH programs to improve situational awareness of Hepatitis C in LAC.	
Dr. Kim-Farley notified the Commission about the closure of ACDC's Environmental Toxicology Lab (ETL). He stated ACDC currently works with DPW were the Water Quality Testing is performed and continues to collect samples for DPW through outside Labs. Dr. Kim-Farley also stated DPH ACDC works with the Board for a permanent solution in continuing the use of the outside Labs.	
Commission Chair Dowling thanked ACDC for their presentation and requested an update from DHS (Dr. Hal Yee), on Hepatitis C in Public Hospitals, and the total population tested for Hepatitis C.	
<ul> <li>Dr. Yee provided the Commission with information on Hepatitis C, and DHS' approach to efficiently and effectively care for its vulnerable patients by the use of a unique model that provides primary and preventive care through the Patient's Center Medical Home. Dr. Yee also stated DHS' primary mission is to provide totality of care for insured and uninsured patients. DHS' approach is for Primary Care Physicians (PCP) to prioritize the health of every patient: <ul> <li>Obtain good social and medical history of their patients</li> <li>Obtain approval to test every patient for Hepatitis C</li> </ul> </li> </ul>	

		<ul> <li>Dr. Yee stated DHS patients obtain consistent education about Hepatitis C, as well as the natural history and treatment.</li> <li>Commission Chair Dowling asked if Hepatitis C should be approached the same way as Tuberculosis (TB).</li> <li>Dr. Yee agreed and expressed his concern about injection drug use in different communities may be a cause for Hepatitis C in some people, showing higher rates in incarcerated people.</li> <li>Commission Chair Dowling expressed the need to refine screening in patients. He thanked Dr. Yee for his presentation.</li> </ul>	
<u>VI.</u>	PUBLIC COMMENT	Ms. Lolita Namocatcat of the Asian Pacific Counseling and Treatment Center expressed her concerns about Hepatitis C.	
<u>VII.</u>	<u>NEW BUSINESS</u>	MOTION: • Election/nomination of new Officers	Commissioner Crawford entertained a motion to nominate Commissioner Dowling as Chairperson, and Commissioner Champommier as Vice-Chairperson. The motion was seconded by Commissioner Champommier. All in favor by saying "I".
<u>VIII.</u>	<u>ADJOURMENT</u>	The meeting adjourned at approximately at 11:55 a.m.	