

**COUNTY OF LOS ANGELES  
PUBLIC HEALTH COMMISSION  
March 10, 2022**

**COMMISSIONERS**

Alina Dorian, Ph.D., **Chairperson** \*  
Diego Rodrigues, LMFT, MA, **Vice-Chair** \*  
Crystal D. Crawford, J.D.\*  
Patrick T. Dowling, M.D., M.P.H.\*  
Kelly Colopy, M.P.P\*

**PUBLIC HEALTH COMMISSION ADVISORS**

Christina Vane-Perez, Chief of Staff \*  
Dawna Treece, PH Commission Liaison\*  
**\*Present \*\*Excused \*\*\*Absent**

**DEPARTMENT OF PUBLIC HEALTH REPRESENTATIVES**

Dr. Barbara Ferrer, Director of Public Health \*  
Dr. Muntu Davis, Health Officer \*\*

<b>TOPIC</b>	<b>DISCUSSION/FINDINGS</b>	<b>RECOMMENDATION/ACTION/FOLLOW-UP</b>
<b><u>I. Call to Order</u></b>	<i>The meeting was called to order remotely at 10:32 a.m. by Chair Dorian</i>	<i>Information only.</i>
<b><u>II. Announcements and Introductions</u></b>	The Commissioners and DPH staff introduced themselves.  January minutes  February minutes	<i>Information only.</i>  <i>Approved</i>  <i>Moved to next month</i>
<b><u>III. Public Health Report</u></b>	Dr. Barbara Ferrer, Director of the Los Angeles County Department of Public Health  A Board order was signed allowing for the continuance of virtual meetings, subject to the Brown Act. The Board will consider the return to in-person meetings again at the end of the month and will be reviewed on a month-to-month basis. Public Health is in the process of finalizing positions for the Director of Communication, the Director of Maternal Child and Adolescent Health, and the Director of DV Council. Other positions that were funded through the CDC infrastructure grant are currently being filled.  Public Health Week is approaching at the beginning of April. The theme is <i>Public Health is Where you Are</i> . There will be a full week of events and more information will be sent out soon.	<i>The Commission should let Dr. Ferrer know their preference so that meeting space can be acquired</i>

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The County reconstitution plan will go into effect on April 4<sup>th</sup>. Many employees have already returned to their work facility. There is a small number of people that will continue to telework full-time. The County has benefitted from the flexibility that telework has allowed, but there is also a loss by not being able to gather for important team building activities in person. There are also more communication challenges. Every employee has been given the option for some flexibility in their work schedule. The flexible work schedules allow people the option of a 9/80 and other accommodations that will help meet our climate change goals of reducing transmission associated with traveling.

At the direction of the Chief Executive Order, effective March 21<sup>st</sup>, the indoor masking requirements for county employees and members of the public who enter county facilities will expire. All workforce members and residents are strongly encouraged to wear appropriate masks or face coverings, except for those settings where face coverings and masks remain required such as public transit, healthcare facilities, and skilled nursing facilities.

The State and Public Health strongly recommend that people continue to mask indoors. At places where masking is optional, the HOO requires that employers offer all their employees respirators and surgical masks. Employees are allowed to ask for and immediately get that higher level of protection.

Although the numbers fluctuate day to day, LAC is averaging about 1,100 new cases this week. Two weeks ago, the average was 1,700. There is a steady decline of about 5% in case numbers each day. If this decline continues, LAC is on track to reach moderate transmission around March 20<sup>th</sup>.

Hospitalization is down to 645 from a month ago when it was at 2,000. The test positivity rate is now between 1% to 1.5%. However, these case numbers are an undercount because lots of people are testing at home and those results are not being reported to Public Health.

LAC has a Post-surge Plan. The plan does not reflect what to do if there is a dramatic increase in cases, but is meant to be a guide for work that should be done over the next few months. The plan has a set of equity-focused post-surge actions that are defined. The action's aim is protecting the most vulnerable and that includes those at risk of

*The Commission is invited to participate in Public Health Week.*

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	<p>experiencing an elevated rate of illness and death. The goals include protecting the hospital health systems,, preventing unconstrained spread and significant illness, and preparing for future challenges. The plan has three core components and uses a set of metrics to assess risk, which are then tied to associated community prevention strategies. It creates an early alert signal system that will trigger a review of contributing factors and potential changes to community and sector-specific prevention strategies. The post-surge preparedness plan builds on what was learned from the past two years.</p> <p>Two weeks ago, CDC released a new methodology for assessing community risk, which LAC will be adopting and reporting on a weekly basis. CDC's new risk levels are determined by a combination of three metrics: new COVID hospital admissions per 100,000 population in the past 7 days, the 7-day average for the percent of staffed inpatient beds occupied by COVID patients, and a total new COVID cases per 100,000 people in the past 7 days. Based on these three new monitoring metrics, CDC categorizes counties as low, medium, or high-community risk levels. Under high risk, CDC does require indoor masking. LAC is currently at low risk.</p> <p>LAC has designated seven early alert signals. Three are called community-wide alert signals, and four that are sector-specific signals. The early alert community signals are dependent on ED visits and the crude case rates in our high poverty communities. The DPH's Dashboard shows those thresholds that have been established and assess whether these signals indicate low, moderate, or high concern. Right now, the only signals showing moderate concern is at the schools. The last component of the plan is the preparedness efforts and those are in five areas: outbreak management, testing, therapeutics, vaccination, and surveillance.</p> <p>A new Health Officer Order was issued last Friday to acknowledge the movement to no longer requiring masking, and strong recommendations, except those sectors where it's required by state and or federal regulation. On March 12<sup>th</sup>, masking will no longer be required in schools, and we will issue the guidance for schools tomorrow to reflect that. The state changed the rules around quarantine and isolation and testing at schools. LAC will fully align with the State, but have noted that we are not comfortable with changes that have been made around the quarantining. Schools still require students that are</p>	
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	<p>returning to campuses that are unvaccinated or haven't been infected in the last 90 days to either wear a mask or get tested. DPH align with the state.</p> <p>For more information click on <a href="http://publichealth.lacounty.gov/media/Coronavirus/index.htm">http://publichealth.lacounty.gov/media/Coronavirus/index.htm</a></p>	
<p><b><u>IV. Presentation:</u></b></p>	<p><b>PRESENTATION OVERVIEW</b></p> <p>Andrea Welsing, Director of the Office of Violence Prevention</p> <p>The office was established by the Board in February 2019 with an annual budget of \$3 million. Since then, a County leadership committee was established and also a Community Partnership Council as the governance structure for accountability and input. The mission is to strengthen collaboration, capacity, and partnerships to prevent multiple forms of violence and promote healing county-wide. The biggest challenge the office is facing is that the program is funded through June 2022. The Board gave an annual allocation of \$3 million for two years, but the overall budget for the violence prevention work is closer to \$15 million annually. Very little of this amount is sustainable or ongoing and most of it is one-time funding. Institutionalized funding is what is ideal to do the work because violence prevention work requires building of relationships and building the work within the community.</p> <p>There has been an increase of violence between 2010 and 2020 in LAC. For the last several years, suicides superceded homicides in LAC. Although suicides outnumber homicides, the suicide trend declined temporarily while there was a sharp increase in homicide in 2020 with 693 homicides. This reflects a number that is the highest that has been seen in a decade.</p> <p>There is certainly a difference among communities when it comes to violent crimes which includes homicides, aggravated assault, rape, and robbery. In certain communities such as SPA 6, there is a higher concentration and heavily impacted by violence. This is also seen in SPA 1 as well, which covers the Antelope Valley, Lancaster, and Palmdale.</p> <p>There has been an increase in violence in the past two years. Homicides rose 41%, and gun homicides rose 39% in 2020 compared to 2019 in LAC. Now we're seeing the</p>	

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	<p>number of homicides in the first quarter of 2021 was 54% higher than the number of homicides in the first quarter of 2020 and 67% higher than first quarter of 2019.</p> <p>Implementation priorities for the next five years falls into six categories that are critical to stop the increase in violence and to reduce violence overall in LAC that includes: Establish Regional Violence Prevention Coalitions (RVPC), Create Community Accessible Open data Portal, Expand Trauma prevention initiative to additional communities, implement crisis response pilot in South Los Angeles, Advance Health Centered and Trauma informed system change, and shift the narrative about violence and trauma. A Regional Violence Prevention Coalition (RVPC) has been established in each SPA.</p> <p>The RVPCs ensure that violence prevention and healing efforts are locally based, survivor centered trauma informed and community driven. Trauma Prevention Initiative (TPI) is a community-based approach to public safety that is comprehensive, place-based, invested in peer intervention strategies and community leadership, and adapted to the unique needs of communities. TPI strategies cover intervention, capacity building and prevention. TPI have been implemented in four communities in South LA since 2016 that includes Westmont West Athens, Willowbrook, Florence-Firestone, and unincorporated Compton. There is a one-year \$5 million expansion for additional communities with high rates of violence that includes: East LA, Puente Valley, Pomona, Antelope Valley, and Hawaiian Gardens/Norwalk.</p> <p>Trauma Informed System Change will prevent and address violence by strengthening trauma-informed approaches among county providers and systems, particularly those serving children and families.</p> <p>The Crisis Response pilot in South LA is different from DMH's and ATI crisis response models. This is after a crisis has occurred in a community. This pilot advances healing-centered and trauma-informed systems change and supports community as well as trying to shift the narrative about violence and trauma. There's a lot of work to be done in communicating that violence is preventable, and it is predictable, and that the course and trajectory can be changed.</p>	
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	<p>The Regional Violence Prevention Coalition was funded last November and is locally based, survivor-centered, trauma-informed, and a community-driven coalitions of diverse stakeholders in each SPA. The only SPA that did not get funded was SPA 5 because of no response from the RFP that was issued. The landscape analysis has been completed and the community action place is in review now.</p> <p>The office was funded to do three years of crisis response starting in South Los Angeles that is currently building a new model and has hired a coordinator. This will respond to anything that the community defines as a crisis within a certain context and investigate homicides, suicides, domestic violence, mass shootings, hate crime, and school incidents.</p> <p>\$20 million from the American Rescue Plan was allocated to Public Health, OVP, and will fund community-based organizations to support crisis response trauma and healing services, and community violence intervention. Tentative start date is July 2022 , and will work with a third-party administrator to help move this work forward.</p> <p>Some challenges and need for support are in the following areas: Data system needs to capture data as individuals move through the system and track progress over time, quantitative and qualitative data to be used to better understand what is happening and what service/solutions are needed; Institutionalized funding for long-term government support; Sustainability infrastructure to support the work and frontline workers; and connecting and aligning County initiative in the hardest hit communities to support community driven solutions and training to support a Culture shift within systems for survivor and healing centered work that integrates an equity lens.</p>	
<p><b><u>V.</u></b>    <b><u>New Business</u></b></p>		
<p><b><u>VI.</u></b>    <b><u>Unfinished Business</u></b></p>	<ul style="list-style-type: none"> <li>▪ 2022 Annual Report <ul style="list-style-type: none"> <li>▪ A motion to vote on the final version of the report</li> </ul> </li> </ul>	<p>SD1 – Aye</p> <p>SD2 – Aye</p> <p>SD3 – Aye</p>

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		<p><i>SD4 – Aye</i></p> <p><i>SD5 – Aye</i></p> <p><i>All in favor to approve annual report</i></p>
<b><u>VII.</u></b> <b><u>Public Comment</u></b>		
<b><u>VIII.</u></b> <b><u>Adjournment</u></b>	<p><b><i>MOTION: ADJOURN THE MEETING</i></b></p> <p><i>The PHC meeting adjourned at approximately 11:55 a.m.</i></p>	<p><i>Commission Dorian called a motion to adjourn the meeting. The motion passed and was seconded by Commissioner Crawford. All in favor.</i></p>