

**COUNTY OF LOS ANGELES
PUBLIC HEALTH COMMISSION
June 9, 2022**

COMMISSIONERS

Alina Dorian, Ph.D., **Chairperson** **
Diego Rodrigues, LMFT, MA, **Vice-Chair** *
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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 **

| TOPIC | DISCUSSION/FINDINGS | RECOMMENDATION/ACTION/FOLLOW-UP |
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| <u>I. Call to Order</u> | <i>The meeting was called to order remotely at 10:30 a.m. by Vice Chair Rodrigues</i> | <i>Information only.</i> |
| <u>II. Announcements and Introductions</u> | The Commissioners and DPH staff introduced themselves. May minutes | <i>Information only.</i> <i>Approved</i> |
| <u>III. Public Health Report</u> | Dr. Barbara Ferrer, Director of Public Health Public Health has new appointments to the leadership team, Noel Bazini-Barakat, who has been with the county for 28 years, has been appointed as the Director of the Office of Planning, Integration, and Engagement. This office will engage community partners, streamline strategic resource planning, and assure those programmatic efforts align with county and departmental priorities and Dr. Andrea Kim was appointed the Director of the Vaccine Preventable Disease Control program. June is Pride month and Public Health supports and values the LGBTQ family. This month gives the opportunity to celebrate and promote dignity, equal rights, and justice. Public Health's presence at the West Hollywood parade was a success and allowed | |

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many residents that attended to become more familiar with the Department. The event was well-attended and the Department received a positive response.

Public Health is currently conducting a departmentwide employee engagement survey. This is a departmentwide survey and is open to all staff, contracted and permanent, to share their experience both before and during the pandemic and to share about issues related to staff retention and employees' understanding of health equity work.

CDC has confirmed Los Angeles County's first case of monkeypox and announced the second presumptive case of monkeypox. Both patients are adults with recent travel. The patients are also symptomatic, but doing well without hospitalization.

Monkeypox is a viral infection that spreads through contact with body fluids, the monkeypox sores, rash, or shared items such as clothing or bedding that have been contaminated with fluid or sores of a person with monkeypox. It can spread between people through saliva or respiratory droplets, but typically these are people who have been in very close contact with each other. It's not considered a sexually transmitted infection, but it can be transmitted during sex through skin-to-skin and other intimate contact, regardless of gender or sexual orientation.

People with monkeypox can develop flu-like illness that can include fever, fatigue, and large lymph nodes, followed by a rash. In some cases, people develop a rash with or without any other symptoms and sometimes the rash can appear in the genital area.

Monkeypox can develop within 7-14 days after exposure, but the incubation period can go for 21 days. Most people with monkeypox have mild illness that improves without treatment over two to four weeks. Monkeypox is contagious and can spread to others until the scabs have fallen off and there is a new layer of skin, which can take about four weeks. The risk of monkeypox remains very low for the general population, but prevention is needed.

Public Health is working with WIC and other providers to ensure that residents have access to infant and toddler formula. Public Health was able to purchase a large amount of formula that will be distributed through our community networks to families with limited means or families who need specialized formula for their children.

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Since the Memorial Day weekend, we no longer see a stabilization or a decline in COVID-19 cases. Yesterday 6,200 cases were reported and today 5,000 new cases and over 550 hospitalizations with a slow increase.

CDC has set a framework that assesses what the community level for counties. LAC remains at the medium community level. This is because of the high case rates is over 320 new cases a week per 100,000 residents. The hospital metrics remain relatively low. Public Health is using two metrics. One metric will capture new admission per 100,000 and the other is the percent of beds occupied by patients with COVID. The threshold for the high community level is having a case rate of ten or more new admission for COVID patients or if there is 10% of the beds occupied by COVID-positive patients.

We're hoping LAC residents will increase their protection and the protection of others. There still is required masking on public transit and in all other those higher risk settings such as nursing homes, shelters, and healthcare facilities. There are 13 counties in California that are in the high level. Most of them are in Northern California. Public Health received a lot of masking complaints; however, there was no pushback on the idea that people are safer if they wear their masks. Public Health's messaging is not just to do an assessment on you and your family, but also assessing the risks of others that are around you daily and the community you live in. Public Health will continue to encourage people to get vaccinated and boosted. DPH's network has over 500 providers. The White House is projecting the start of vaccinating younger kids soon. Public Health is working with our providers networks to ensure readiness for rollout.

The FDA's advisory Committee and the CDC's advisory committee will meet soon to discuss whether to approve the vaccines for the younger kids. It is anticipated the orders are likely to start getting shipped out if they are approved by the 20th, which means administration or rollout will start on the 21st.

For more information click on

<http://publichealth.lacounty.gov/media/Coronavirus/index.htm>

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IV. Presentation:

PRESENTATION OVERVIEW

Joshua Bobrowsky, Director of Government Affairs and Francisco Reyes provided an update on the State and Federal budget and impacts to DPH.

The President released his budget in late March for federal fiscal year 2023. There are some public health investments that were included, such as line items specifically for public health infrastructure. This is the first time the president's budget has committed resources for this line item that would have flexibility and funding for public health infrastructure at all levels.

Theses investments are: \$200 million for data modernization efforts, an increase of \$1.1 billion for the substance abuse prevention and treatment efforts, and an additional investment of \$165 million in funding for ending the HIV epidemic, which LAC is a direct grantee for those resources.

Congress is expected to begin marking up appropriations bills next week. It is anticipated but it is not likely to see a budget deal until after the November elections and there will probably be a continuing resolution that keeps funding at this year's level until a deal is reached likely in the lame duck session. There is \$1 billion for Public Health Emergency Preparedness, supporting the request from national partners, and of which LAC is expected to receive funding.

Gov. Newsom unveiled his \$300 billion fiscal year 22-23 May revision budget proposal, which has an increase of approximately \$14 billion compared to his January budget. So, the State has a surplus of more than \$86 billion. However, the surplus is going largely to budgetary reserves and to fund one-time projects as opposed to ongoing commitments.

The May revision has several areas with new investments that impact public health. For COVID response, it commits a total of \$2.3 billion in general funds in the next fiscal year. This will ensure an increase in testing, vaccination efforts, therapeutics, hospital surge supports, and support for vulnerable populations and other areas.

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| | <p>The budget includes an expansion in Medi-Cal to include eligible or all income-eligible populations regardless of immigration status for the proposed expansion to the ages 26-49. It assumes the cost of \$834 million in total funds in FY23-24 with a planned implementation date of January 2024.</p> <p>The May revision allocated \$300 million for climate change and energy proposals activities related to extreme heat. The legislature recently announced their adopted package. \$21 billion in funding for climate change and energy proposals but will be subject to negotiations later for allocation after the initial budget bill is enacted by the June 15th deadline.</p> <p>The budget has committed additional childcare and early childhood program resources for additional slots and reimbursement rates. For behavioral health and homelessness, the legislature approved the governor’s proposed investment of \$1.5 billion over two years for immediate clinic enhanced bridge housing solution for individuals with severe mental illness experiencing homelessness. A \$290 million investment in youth suicide prevention and behavioral health was approved.</p> <p>The Governor included \$300 million in ongoing funds to support public health infrastructure for local health jurisdictions. Out of that allocation, \$200 million will be allocated annually for local health jurisdictions to enhance public health infrastructure. Public Health has collaborated with local partners to develop the key metrics, and minimum requirements for use of the fund and reporting requirements as well.</p> <p>Additional investments will expand home visitation services for the Black Infant Health Program. The May revision committed \$59 million to the ongoing general fund for CDPH to expand the Home Visitation program in the California Black Infant Health program.</p> <p>The administration proposed the sunset of the Child Health and Disability Prevention program (CHDP) in July 2023. The aim was to advance CalAIM’s goal to streamline the Medial program through Cal AIM. DHCS was planning to implement the Children’s Presumptive eligibility program to replace the CHDP gateway, thus allowing Medi-Cal providers to enroll children in Medi-Cal through the presumptive eligibility process. Many CHDP programs along with legislative affairs units worked collaboratively with SEIU and</p> | |
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| | <p>a range of statewide opposition to this proposal to sunset the CHDP program and we are pleased that the legislation package was rejected.</p> <p>The May Revision included items to implement the Governor's SMARTER plan, which included additional investment in testing, \$530 million vaccines, \$93 million the test to treat therapeutics, and \$158 million for wastewater surveillance. The Climate and Health Resilience Planning grant program at \$25 million will provide resources for local health departments to work with partners to conduct planning activities. LAC has already done a lot of planning and would like to see the funding go toward supporting ongoing implementation.</p> <p>In reproductive health, the administration has new proposals to build on the \$68 million included in the Governor's January budget. This proposed funding includes uncompensated care funding for reproductive health services and the California Reproductive Justice and Freedom fund. \$20 million was approved in a pilot effort for LAC.</p> <p>The May revision included \$350 million in general funds to recruit, train, and certify 25,000 new Community Health Workers by 2025, in partnership with the Department of Healthcare access information.</p> <p>There are many advocacy requests that the county supported and with one of them is ending the epidemics. This work will increase funding that will go toward HIV, STDs, and homelessness reduction efforts. This was a \$57 million package in one-time general funds and \$47.4 million in ongoing general funds. The county has also supported a community request for the Health Equity and Racial Justice funds. The request was for \$100 million in ongoing funding to support community efforts around health equity and racial justice.</p> <p>A Hero initiative that was advocated by CIAC, HOAC and SEIU and supported by LAC was in the package of one-time commitments. This is to support public health infrastructure, with recruitment, retention and several components that will support public health workforce over the next few years.</p> | |
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| <u>V.</u> <u>New Business</u> | | |
| <u>VI.</u> <u>Unfinished Business</u> | | |
| <u>VII.</u> <u>Public Comment</u> | | |
| <u>VIII.</u> <u>Adjournment</u> | <p><i>MOTION: ADJOURN THE MEETING</i></p> <p><i>The PHC meeting adjourned at approximately 11:50 a.m.</i></p> | <p><i>Commission Rodrigues called a motion to adjourn the meeting. The motion passed and was seconded by Commissioner Crawford. All in favor.</i></p> |