

**COUNTY OF LOS ANGELES  
PUBLIC HEALTH COMMISSION**

April 13, 2023

**COMMISSIONERS  
REPRESENTATIVES**

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

**DEPARTMENT OF PUBLIC HEALTH**

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

**PUBLIC HEALTH COMMISSION ADVISORS**

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

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

<b>TOPIC</b>	<b>ACTION/DISCUSSION/FINDINGS</b>	<b>RECOMMENDATION/ACTION/FOLLOW-UP</b>
<b><u>I.</u></b> <b><u>Call to Order</u></b>	<i>The meeting was called to order remotely at 10:30 a.m. by Chair Rodrigues</i>	<i>Information only.</i>
<b><u>II.</u></b> <b><u>Announcements and Introductions</u></b>	<p>The Commissioners and DPH staff introduced themselves.</p> <p>Action for March minutes with noted changes</p>	<p><i>Information only.</i></p> <p><i>Approved</i></p>
<b><u>III.</u></b> <b><u>Public Health Report</u></b>	<p>Barbara Ferrer, Director of Public Health</p> <p>DPH sends its heartfelt wishes of joy, peace, and health to those who celebrated Ramadan, Passover, and Easter last week.</p> <p>DPH celebrated Public Health week last week with multiple events across the county. The theme was “Centering and Celebrating Cultures in Health.” The planned events recognized the importance of our community partnerships. Every event held was in partnership with community groups and residents. DPH has learned over the years how important those relationships are. One of the events was held at the Student Wellbeing Center in Montebello and another at the Health Center at MLK with residents helping close the gaps in infant and maternal mortality.</p>	<i>Department Update</i>

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	<p>The department launched the 2023 Health Heart campaign and showcased some of the Environmental Health work. It showcased worked around substance use disorders and improving access to Narcan and highlighted the kind of work Public Health does to advance optimal health and wellbeing across all residents and workers.</p> <p>Our Heart Heroes campaign was launched last week. This is the hands only CPR training. The goal is to train 500,000 people across the county. DPH has an amazing network of partners, including major sports teams and traditional partners such as LA Fire, County Fire, LAPD, County Sheriff, EMS, American Red Cross, and AHA. Training participants will need to show they can perform CPR on the mannequin to in order to complete their training and get their card. Stella Fogleman, EPRD Director will help to lead the effort in getting to our goal.</p> <p>DPH released the Gun Violence Prevention platform on Friday of Public Health Week. The platform includes four areas of priority with strong collaboration with county and community partners. DPH is strongly advocating to reinstate the ban on assault weapons and to improve access to services and support to students to make sure that people are using gun restraining orders, know how to file them, and know when they appropriate.</p> <p>Note Worthy:</p> <p>May 6<sup>th</sup> is LA County Day of the Fair at the Fairplex. DPH will also be there doing HOCPR training, providing vaccinations, and providing other resources.</p> <p>DPH received 13 awards from the National Association of County and City Health Officials for their model and promising practices. The work is not only about COVID but on food waste reduction efforts, syphilis, efforts to reduce congenital syphilis, targeted rabies outreach, protecting skilled nursing facilities and residents.</p> <p><i>COVID-19</i></p>	<p><i>Will send addition information</i></p> <p><i>Share link to NAcO for DPH's awards</i></p>

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	<p>COVID cases have been declining. This week there were about 1000 cases reported. Hospitalizations are low, case numbers are low, and death rates are relatively low. Although there is an XBB Omicron variant 1.16 being monitored in India, it's not rapidly spreading or increasing hospitalizations. DPH feels confident numbers will stay low with the use of good therapeutics and with good protection around severe illness from vaccines and the bivalent boosters. CDC will discontinue the use of monovalent mRNA vaccine. The only doses that will be circulating and available for administration will be the bivalent dose. More than likely older adults and adults with underlying health conditions will be able to get the second bivalent dose. The department's network sites will be ready to administer as soon as the FDA and CDC gives the okay.</p> <p><i>Emergency Orders</i></p> <p>Many of the emergency declarations have expired or are expiring soon. The federal COVID state of emergency was just lifted by congress and then signed by the president. The HHS Public Health Emergency has not lifted and will not be lifted until May 11th. The flexibilities around insurance coverage is the biggest change. In California, people on Medi-Cal or Medicare will continue to have free access to vaccines and boosters and to therapeutics. DPH is currently purchasing a large supply of test kits for distribution. DPH will keep the telehealth program and Homebound programs in place. No one will be turned away for vaccinations. However, DPH will be more mindful on asking for insurance information for reimbursement.</p> <p>The State Health Officer orders have changed and DPH is aligned with most of the recommendations except the following: DPH still require healthcare workers to be vaccinated. And DPH require masking of employee who are either providing patient care or in patient care areas. Visitors and patients no longer required but it is strongly recommended to mask. In LAC, health care workers are required to be vaccinated for flu or to wear a mask during flu season. One of the biggest issues with our</p>	

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	<p>health care facilities was staffing shortages because staff were getting sick. There still is a health officer order that require people to report three or more cases. That's going to continue because it's the early alert signal if case numbers are not good. DPH will try to make sure that worksites, schools, and healthcare facilities will benefit from the DPH team capacity to help with outbreak management.</p> <p>Comments/Recommendation:</p> <p>Dowling: There is a lot of interest in learning CPR and the Heart Heroes program because what happened to the football player. But another huge challenge is the overdose and the cost of Narcan. It can seem like the big pharma may be profiting in the middle of an enormous crisis.</p> <p>Dr. Ferrer: yes, the cost of Narcan is \$50. DPH currently incurs the cost, however, it is given away for free to benefit the community.</p>	
<b><u>IV. Presentation:</u></b>	<p>Stella Fogleman, Director, Emergency Preparedness and Response Division.</p> <p><b>COVID-19 Response Priorities:</b></p> <ul style="list-style-type: none"> <li>• Mitigate the impact of the pandemic and prevent as much serious illness and death as possible</li> <li>• Ground policy decisions in the most current science</li> <li>• Advance an equitable response to address disparities in health outcomes related to race and class</li> <li>• Protect essential workers and ensure the viability of the health care safety net throughout the crisis</li> <li>• Ensure Countywide access to vaccines, treatments, and other resources as they became available</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Keep County residents and stakeholders informed through frequent communications and rapid data sharing at a pace and scale never attempted</li> </ul> <p>In late 2021 DPH commissioned Manatt Health to conduct an interim review and report of the ongoing Covid-19 response. They conducted a series of approximately 150 interviews internal and external to the Department, 14 community listening sessions, and extensive data review.</p> <p>In December 2022, Manatt released their Covid-19 Pandemic Response Interim Review and Sustaining Recommendations:</p> <ul style="list-style-type: none"> <li>• Strengthening External Communications</li> <li>• Advancing Equity by Addressing Social Drivers of Health and Aligning County Resources More Effectively for Those Most Vulnerable</li> <li>• Building Stronger Stakeholder Relationships</li> <li>• Utilizing Public-Private Convening</li> <li>• Training and Recruiting LAC DPH Workforce</li> <li>• Enhancing Communications within LAC DPH</li> <li>• Expanding Workforce Supports</li> </ul> <p>Transformational Recommendations:</p> <ul style="list-style-type: none"> <li>• Ensuring Clarity Countywide of Roles and Responsibilities During a Health Emergency</li> <li>• Supporting Nimbleness in Pandemic and Public Health Crisis Response</li> <li>• Reducing Barriers to CBO Partnerships</li> <li>• Evaluating Compliance Tools</li> <li>• Enhancing Public Health Information Technology</li> </ul> <p><b>Applying Lessons Learned from Covid-19: MPOX</b></p> <ul style="list-style-type: none"> <li>• Established Incident Command to coordinate response</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Requested our full allocation of vaccines and treatments from the Strategic National Stockpile</li> <li>• Leveraged existing partnerships for prevention messaging, education, testing, vaccine administration and treatment               <ul style="list-style-type: none"> <li>• Clinics, HIV providers, mobile vaccine team, pharmacies</li> <li>• Targeted efforts to areas with highest case burden and at-risk populations</li> </ul> </li> <li>• Worked with trusted CBOs, providers, and community leaders to reach at-risk populations (MSM, PEH, commercial sex workers) and at high-risk venues (events, clubs)</li> <li>• Provided medical consultation and technical assistance to healthcare community</li> <li>• Expanded public vaccination sites when more doses available</li> </ul> <p><b>Applying Lessons Learned from Covid-19: RSV &amp; Flu</b></p> <ul style="list-style-type: none"> <li>• Surveyed hospitals and healthcare entities to validate reported medication shortages (especially for children)</li> <li>• Worked with healthcare entities to make resource requests via the CA Medical and Health Operational Area system</li> <li>• Received authority to use Tamiflu from our local cache and distributed doses to hospitals and skilled nursing facilities experiencing shortages</li> <li>• Advised the public on where to find commonly out of stock over-the-counter medications (especially for children)</li> <li>• Highlighted pharmacies capable of compounding medication for children</li> </ul> <p><b>New EPRD preparedness strategies include:</b></p>	

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	<ul style="list-style-type: none"> <li>• Capturing, assessing, and inventorying all the Covid-19 response protocols and plans for use in future responses</li> <li>• Conducting innovative jurisdictional risk assessment (Fall 2023) to determine preparedness priorities for the next 5-year CDC preparedness grant cycle</li> <li>• Establishing process/system of linking planning, training, and exercising for Department going forward</li> </ul> <p><b>Applying Lessons Learned from Covid-19: Future Pandemic Preparedness - Innovations</b></p> <ul style="list-style-type: none"> <li>• CBO Equity Grants for health education, advocacy, and system navigation</li> <li>• Mobile Vaccine Teams and Homebound Vaccination Team</li> <li>• Skilled Nursing Facility Outbreak Management Team</li> <li>• Therapeutics Telehealth Program</li> <li>• IT Advancements (AI and Bot assistance, customer relationship management system, automated notification, and communication systems)</li> <li>• Countywide Call Center integration</li> <li>• Clinic, hospital, healthcare provider and pharmacy partnerships for vaccination and therapeutics</li> <li>• HIV/STD clinic and service provider partnership to vaccinate at-risk populations</li> <li>• Public vaccination sites in highly burdened communities and high-risk venues</li> <li>• Established 35 treatment hubs and more than 400 satellite sites</li> <li>• Therapeutics Team provided education, consultation and treatment access via clinics, hospitals, and pharmacies</li> <li>• LRN consultation to private labs, testing, sequencing, and resistance mutation support</li> </ul>	

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	<ul style="list-style-type: none"> <li>• Case linkages to primary care, HIV care, housing, and food assistance</li> </ul> <p>Recommendation/Comments:</p> <p>Comm. Dorian: Thinking about sustainability, the next time something like this happens, will it be the same job functions that will move into the EOC and what will that look like? Also, is there a possible public health reserve corps? UCLA received funding from CDPH around contract tracing case investigation, training people and send them out during COVID. Is Public Health thinking of a reserve core team for disasters?</p> <p>Stella: One of the Manatt recommended committees is looking at the EOC, the ICS structure, and the training that DPH has for the Public Health Staff. Regarding the reserve team, Jee Kim is our Public Health Disaster Volunteer Manager as well as the Medical Countermeasures Manager. She runs a Medical Reserve Corps for LA County, and they do monthly trainings and responses. These people were the ones to stand up the Pomona Housing and isolation and quarantine housing and initially staff it, now they are going to train the trainers.</p> <p>Comm. Dowling: Very much aware of the African American population's distrust and beliefs given the Tuskegee study that made it harder to convince them of medical treatment. Have those barriers lessened now?</p> <p>Dr. Ferrer: There's a lot of painful history. There are some people who are just simply against vaccines and there are those who have legitimate reasons for wondering about their safety and fast approvals and how much money did the drug company pay to get things done. The work that needs to be done to regain the public's trust is not going to happen overnight because of this history.</p> <p>Comm. Rodrigues: Recently met with a few faith-based leaders on the eastside and they were interested in a movement to address miscommunication and some of the theories and fearmongering of community. They would like to be a part of the Heart Heroes.</p>	



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	Stella: DPH would want to recruit them as heart heroes and get them to be trained. Will have mannequins that we can make available for training too.	
<u>V.</u> <b><u>New Business</u></b>	<ul style="list-style-type: none"> <li>• Recommendation Letter</li> </ul>	A motion to approve the letter. All in favor to move forward with recommendation letter but will follow up on possible conflict of interest on behalf of one of the Commissioners.
<u>VI.</u> <b><u>Unfinished Business</u></b>	<ul style="list-style-type: none"> <li>• 2022 Annual Report</li> </ul>	A motion to approve the annual report from Commissioner Rodrigues. All in favor to approve and seconded by Commissioner Colopy.

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<u><b>VII. Public Comment</b></u>		
<u><b>VIII. Adjournment</b></u>	<p><b>MOTION: ADJOURN THE MEETING</b></p> <p><i>The PHC meeting adjourned at approximately 11:56am.</i></p>	<p><i>Commissioner Rodrigues called a motion to adjourn the meeting. The motion passed and was seconded by Commissioner Crawford. All in favor.</i></p>