

**COUNTY OF LOS ANGELES
PUBLIC HEALTH COMMISSION
March 14, 2024**

APPROVED

COMMISSIONERS

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

DEPARTMENT OF PUBLIC HEALTH REPRESENTATIVES

Barbara Ferrer, Director of Public Health **
Muntu Davis, County Health Officer**
Anish Mahajan, Chief Deputy Director*

PUBLIC HEALTH COMMISSION ADVISORS

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

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

TOPIC		RECOMMENDATION/ ACTION/ FOLLOW-UP
<u>I. Call to Order</u>	<i>The meeting was called to order at 10:35 a.m. by Commissioner Dorian</i>	<i>Information only.</i>
<u>II. Announcements and Introductions</u>	The Commissioners and DPH staff introduced themselves. Action for minutes Land Acknowledgement	<i>Information only.</i> <i>Moved to next meeting.</i> <i>Read by Commission Dorian</i>
<u>III. Emergency Circumstance</u>		
<u>IV. Public Health Report</u>	Anish Mahajan, Chief Deputy Director, gave COVID-19 updates and other public health updates. Just Culture Public Health has been investing a lot of additional resources and time coming out of the pandemic in renewed initiatives around Just Culture. Just Culture is a system that originated or was used in the aviation and/or nuclear power type industries. It is a system that acknowledges that errors that occur in the workplace are not just the result of individual behavioral choices but often there are systems behind why employees do things that contribute to errors and inefficiencies. Just Culture, in DPH, refers to a system of shared accountability. The HR Department is accountable for the systems in which our workers work,	

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	<p>and workforce members are also accountable for the quality of their choices. Public Health has been collaborating with labor union partners to cultivate Just Culture for many years. It began before the pandemic, but the department had to switch focus during the pandemic. Now, as we come out of the pandemic, there is a renewed focus at the DPH level. The Just Culture 2.0 version basically will involve a lot more training and the goal is to have a public health focus that creates trust, and a positive work environment, and provides a bank of resources on the ongoing way to staff to maintain an approach to Just Culture. The department will finalize its trainer recruitment in February and then deploy the train-the-trainers in April through July with a launch of the revised training for all staff at the beginning of August.</p> <p>COVID-19</p> <p>LAC's indicators are declining and we see similar patterns across the nation. Public Health ended its COVID-19 news release at the end of February but will continue to provide updated data weekly on the dashboards found on the website. Public Health will continue to monitor COVID-19 circulation. CDC and DPH will continue to endorse those who are over 65 years of age remains vulnerable to COVID and recommend an additional dose of the updated vaccine even if they received it in the fall. The same for those who are immunocompromised. The vaccine is available to everybody in the county, regardless of insurance or immigration status. Information on where to get the vaccine is on the website. There's also a hotline available for people to ask questions. For those that are homebound or need vaccination assistance, there is a seven-day-a-week hotline from 8am to 8pm.</p> <p>Incident Command System</p> <p>At the beginning of the pandemic in early 2020 Public Health deployed the Incident Command System (ICS). This structure allowed quick mobilization of thousands of Public Health workers as disaster service workers doing roles that are not traditionally their job but needed to meet the needs of the pandemic. This included thousands more disaster service workers from other departments, other government organizations, community partners, and volunteers. After four years of having it in place, the team accomplished:</p> <ul style="list-style-type: none"> • Over 4,000 community organizations that include CBOs, FPOs, healthcare partners • Surveillance: 79 million COVID tests that were reported to DPH. 3.8 million confirmed COVID-19 cases were reported through electronic lab reporting, manual test reporting, and provider 	

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	<p>reporting. 22.8 million doses were administered to 8.38 million LAC residents</p> <ul style="list-style-type: none"> • 88,600 mobile vaccine events were held • 12,000 outbreaks investigated • Over 171,000 COVID tests processed. • 9,000 prescriptions written by DPH telehealth providers • 350,000 courses of medications for COVID were allocated to our community providers • 4.9 million COVID test kits • PPE: 133 million PPE items were distributed • Over 1,000 information disseminated through listservs to the community partners • Over 32,000 sector inquiries were responded to by schools and businesses • Over 1,400 press releases, • 250 press conferences were conducted • 450,000 calls were received by the call center and answered by community members • 25 million contacts made by our peer health promoters and system navigators <p>So after four years, the ICS has come to an end. Very grateful for the staff, and community partners for the work that was done throughout.</p> <p>Public Health Week</p> <p>Public Health Week is the first week of April. This year’s theme is: “Protecting, Connecting, and Thriving. We’re all Public Health.” Public Health is working with programs, collaborating with partner departments, and community-based organizations to host many events. There will be a launch of parent cafes, a resource for parents and caregivers of children or youth with special healthcare needs. CalFresh, a healthy living food distribution event. Narcan and Hand Only CPR training for youth in partnership with our Peer Health Advocates, highlighting our positive youth development programs in partnership with LA County Parks. Celebrating Transgender Day of Visibility and launching the Whittier Wellness Community.</p> <p>Comments/Recommendations:</p> <p>Dorian: Just Culture is a very interesting work and the whole idea that culture is forever. Interested in understanding the mandatory package of training, what that looks like, and understanding the guardrails of Just Culture versus some of the other things out there.</p>	

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	<p>Mahajan: We have received input from labor partners and staff. Staff who are interested in providing the Just Culture training have been nominated or can self-nominate. There were many investments done related to some consulting and with our training office who have gone out to receive training on Just Culture train-the-trainer. DPH had to go back and take an algorithmic approach to how we address an adverse event or something that has gone wrong. One component of the training is going to be ensuring that we train our frontline staff and our managers to know how you take a problem or an adverse event that happens and show you begin to understand how you break it down to identify the system issues that exist versus the choices that the employee made within that system. Another component is looking at how staff, both managers and supervisors and frontline staff, communicate because so much is about facilitation and communication. Many errors can occur because of miscommunication.</p>	
<p><u>V. Presentation</u></p>	<p>Joshua Bobrowsky, Director, Government Affairs</p> <p>In the January budget, the Governor put out a \$37.9 million deficit to make up. Several factors contributed to the deficit. The Governor’s budget forecasts General Fund revenues will be substantially lower than the 2023-24 Budget Act projections, and CA now faces an estimated budget gap of \$37.9 billion in the 2024-25 fiscal year. The governor is using different methods to try and balance the budget including reductions, pullbacks, funding delays, fund shifts, revenue, and internal borrowing and deferrals.</p> <p>Areas where the governor maintains commitment previously made include to</p> <ul style="list-style-type: none"> • Expand MediCal to all eligible residents, regardless of immigration status, for 26–49-year-olds. • \$300 million in public health infrastructure commitment • Maintains \$2.4 billion to continue CalAIM transformation of the health care delivery system. 	

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	<p>Some of the cuts seen specifically impacting LAC, the governor proposed to eliminate:</p> <ul style="list-style-type: none"> • The Public Health Nursing Intervention Program. This is a program that SEIU had championed in the legislature and the county supported to bring on additional Public Health Nurses for the Child Welfare system to reduce caseloads, but also to address all the health medical needs of children before they are detained in custody. This was a \$8.25 million annual allocation for the County’s PHNEI Program. Without base funding, this program cannot launch. DPH will continue to work with SEIU and other partners to take a position and oppose this cut. • Health Care Program for Children in Foster Care (HCPCFC) Funding Reduction. Child Health and Disability Prevention (CHDP) program will sunset on July 1, 2024. CHDP traditionally administrated local HCPCFC programs. As part of the CHDP transition, the budget redirects \$20.83 million away from the local HCPCFC administration to fill other needs. • A reduction of \$54 billion to \$48 billion in climate investments over the next 7 years • \$200 million reduction to the Active Transportation Program. This funding supports a lot of the street projects and incorporates active transportation, and pedestrian safety planning, and funded a number of pedestrian-planned activities where there was work and engagement with communities to identify improvement for pedestrian mobility. <p>As for deferments, the minimum wage increase for HealthCare sector workers may be delayed in some cases. The budget includes a delay of \$140 million for the BH Continuum Infrastructure Program. Although this may not have an immediate impact now, it may potentially have in the future.</p> <p>The administration is also proposing to increase the managed care organization provider tax as those are statutorily created for the US from 2023 to 2026. This creates a state revenue source that can draw down federal funds to improve the Medicaid and Medical system in California. The administration is seeking to increase an additional</p>	

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	<p>\$1.5 billion for a total of \$20.9 in total funding to the state. \$13 billion of that would support Medical with \$8 billion targeted for provider rate increases and investments.</p> <p>Next Steps</p> <ul style="list-style-type: none"> • Next update expected in the Governor’s May Revised budget • Final Budget approval in the summer <p>FY 2024-25 Key State Legislation</p> <p>SB 59 (Skinner) Menstrual Product Accessibility Act: Requires all women’s restrooms, all All-gender restrooms, and one men’s restroom in a building owned and used by the State to be stocked with menstrual products available and accessible to employees and the public.</p> <p>AB1956 (Reyes) Victim Services: Requires CA office of Emergency Services to allocate funding for a shortfall in Federal Victims of Crime Ace (VOCA) funding.</p> <p>AB 1975 (Bonta) Medically supportive food and nutrition Interventions: This makes medically supportive food and nutrition interventions, as defined, a covered benefit under the Medi-Cal program, through both the fee-for-service and managed care delivery systems, effective July 1, 2026.</p> <p>AB 2297 (Friedman) Hospital and Emergency Physician Fair Pricing Politics: This bill makes changes within the Hospital Fair Billing Act related to hospital and emergency physician pricing policies. This will also require hospitals to have a written policy for charity care and discounted care for uninsured patients or insured patients with high costs who are at or below 400 percent federal poverty line.</p> <p>AB 3043 (Rivas) Occupational Safety: Fabrication Activities: This establishes a licensing framework for engineered stone fabrication businesses, requiring licensed entities and enforcement actions to be listed on a State website. Also implements industry requirements contained in the States’s Emergency Temporary Standard including banning dry cutting and requiring wet cutting processes.</p>	

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	<p>FFY 2024 Federal Budget – Updates</p> <p>President Biden recently signed a minibus budget. Congress usually put forth an omnibus deal, but this minibus was a strategy to divide into two groups to try to make progress on some of the less controversial bills. This minibus budget covers 6 appropriation bills, at over \$460 billion, to partially fund the government for FY 24.</p> <p>The second tranche of appropriation bills has more challenging policy issues, including defense, labor, and HHS, which impacts much of our funding and homeland security. There is a March 22nd deadline, and a risk of a government shutdown if that deadline is not met. The Congressional Budget Office had indicated that part of the deficit reduction deal that had been approved previously put a cap on federal spending on the defense side and the non-defense side. There is a concern if Congress does not reach a deal by April 30th, then an across-the-board 1% rescission goes into effect. However, because of changes made by both this minibus and the recent continuing resolution that lowered future outlays on the non-defense side, that 1% rescission will not go into effect on April 30th. This may give Democrats a little leverage in terms of negotiations.</p> <p>Recommendations/Comments:</p> <p>Dowling: Glad that the minimum wage for the healthcare worker is being addressed. The hospitals remain understaffed.</p> <p>Joshua: We will continue to watch that although it has less impact on the department, it has an impact on the county.</p> <p>Green: I recently had to respond to a shooting, and then go to Harbor General Hospital to deal with victims of crime services. Just thinking about victims of crimes and what services are in place.</p> <p>Joshua: It provides funding for a lot of community-based organizations and domestic violence. Many partners are contracted for our services. There was a survey done to find out what the impact of potential cuts would be, and it is known that there would be layoffs of experienced workers. This is very concerning.</p>	

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VI. <u>New Business</u>	Recommendation letter	A motion was called to approve the recommendation letter. All in favor and was seconded by Commissioner Dorian
VII. <u>Unfinished Business</u>	2023 Annual Report	The report will be sent for review before the next meeting
VIII. <u>Public Comment</u>	<p>Caller J.T: Are the elderly, the disabled, the immunocompromised, the children who are unable to vaccinate be they too young or for whatever reason, are they acceptable losses in the fight against COVID?</p> <p>Caller H.D: Advised cannot rely on vaccines alone and it does not prevent transmission of COVID. Caller advised to bring back universal masking in health care settings and that it should be permanent because it can protect against more than just Covid.</p> <p>Caller M.: Called to demand Public Health reinstate mask requirements in the healthcare setup. He advised that Public Health did a great job during the pandemic until the mask requirement was dropped.</p> <p>Caller J.J: Would like to see the lessons learned during the pandemic and not dismantle the system that was built. Advised masking should remain in healthcare permanently.</p>	

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	Attendee J.C: Advised worked for a mental health client rights movement project in the 90s. His situation lately is the Jews from Syria, Iraq, Egypt, and other Muslim countries who left during WWI.	
<u>IX. Adjournment</u>	<p>MOTION: ADJOURN THE MEETING</p> <p><i>The PHC meeting adjourned at approximately 11:52 p.m.</i></p>	<p><i>Commissioner Crawford called a motion to adjourn the meeting. The motion passed and was seconded by Commissioner Dowling.</i></p>