

**COUNTY OF LOS ANGELES
PUBLIC HEALTH COMMISSION
DECEMBER 13, 2012
MINUTES**

COMMISSIONERS

Michelle Anne Bholat, M.D., M.P.H., Chairperson*
Patrick Dowling M.D., M.P.H., Vice-Chair*
Waleed W. Shindy M.D., M.P.H.**
Jean G. Champommier, Ph.D.*

DEPARTMENT OF HEALTH SERVICES REPRESENTATIVE

Jonathan E. Fielding, Director of Public Health and Health Officer***
Angela Haley, Secretary*
Public Health Commission

PUBLIC HEALTH COMMISSION ADVISOR

Cynthia Harding, Acting Chief Deputy**
Public Health

PUBLIC HEALTH COMMISSION YOUTH ADVISOR

Vacant

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

TOPIC	DISCUSSION/FINDINGS	RECOMMENDATION/ACTION/ FOLLOW-UP
I. CALL TO ORDER	The meeting was called to order at approximately 10:06 a.m. by Vice-Chairperson Dowling at Central Health Center.	Information only.

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II. ANNOUNCEMENTS & INTRODUCTIONS	<i>Introductions of Commissioners and guests were conducted.</i>	<i>Information only.</i>
III. APPROVAL OF MINUTES	<p>MOTION: APPROVAL OF THE NOVEMBER 8, 2012 MINUTES</p> <p>MOTION: APPROVAL OF THE OCTOBER 25, 2012 MINUTES</p>	<p><i>Chairperson Bholat entertained a motion from Vice-Chairperson Dowling, seconded by Commissioner Champommier and carried unanimously.</i></p> <p><i>Chairperson Bholat entertained a motion from Commissioner Shindy, seconded by Commissioner Champommier and carried unanimously.</i></p>

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<p>IV. PUBLIC HEALTH REPORT</p>	<p>Carrie Brumfield provided the Commission with a Public Health Report and discussed public health activities since the last report on November 8, 2012.</p> <p>Advanced Copy: "Los Angeles Mommy and Baby 2010 Surveillance Report"</p> <p>The report summarizes the findings from the 2010 Los Angeles Mommy and Baby (LAMB) survey conducted by the DPH Maternal, Child, and Adolescent Health programs. The report examines the key indicators of health for new mothers and infants in L.A. County and is integral in determining which communities and health indicators require more immediate attention. The report will be released to the public next week and will be made available on the DPH website.</p>	

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<p>IV. PUBLIC HEALTH REPORT CONTINUED</p>	<p>Advance Copy: L.A. Health Brief “Adult Smoking on the Decline, but Disparities Remain”</p> <p>Ms. Brumfield distributed and discussed the latest 2011 Department of Public Health (DPH) L.A. Health brief, which focuses on the disparities in adult cigarette smoking in L.A. County. The DPH Office of Health Assessment & Epidemiology and the Tobacco Control and Prevention Program collaborated on this report. It is anticipated that the report will be released on November 15, 2012 in tandem with the Great American Smokeout. The report will also be available on the DPH website.</p> <p>Quarterly Report – Water Quality Monitoring</p> <p>On November 29, 2011, on a motion by Supervisor Antonovich, DPH was instructed to provide quarterly reports on its monitoring activities, including findings and actions taken to address water quality issues. Attached is the third of such reports, covering the period of July 1 to September 30, 2012. The report summarizes water quality findings in small water systems throughout the county, and outlines the actions taken by the DPH Environmental Health Division in response to these findings.</p>	

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<p>IV. PUBLIC HEALTH REPORT CONTINUED</p>	<p>Measure B <i>Ms. Brumfield informed the Commission that Measure B (safer sex in the adult film industry) passed, and DPH is responsible for implementing and enforcing the measure. Effective, December 14, 2012, DPH can start receiving complaints regarding the adult film industry.</i></p>	

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<p>V. DIVISION OF HIV AND STD PROGRAMS</p>	<p>Mario Perez, Director, Division of HIV and STD Programs provided the Commission with an update of the activities within HIV and STD Programs.</p> <p><i>In a Nutshell</i></p> <ul style="list-style-type: none"> • HIV and AIDS incidence are decreasing • HIV and AIDS prevalence is increasing • AIDS-related deaths are decreasing • New reported HIV cases are decreasing • HIV testing volume is increasing • Levels of viral suppression are increasing • Levels of co-infection persist • STD cases are increasing • Gonorrhea is becoming more complex • African-Americans most disproportionately impacted • Latinos make up plurality of PLWHA • Transgender disparities persist • Late entry into care persists • Gay men shoulder 80% of the HIV epidemic • 70% of PLWA are between 40-59 years old • 80% of PLWH are between 20-49 years old • Most STDs are among young women of color 	

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<p>V. DIVISION OF HIV AND STD PRORAMS CONTINUED</p>	<p>Estimated HIV Incidence, U.S., 2006-09</p> <ul style="list-style-type: none"> • 48,600---56,000---47,800---48,100 • 21% increase among 13-29 year olds, driven by • 34% increase among young MSM, driven by • 48% increase among young African-American MSM!!! <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: center;"><u>L.A. County</u></td> <td style="text-align: center;"><u>California</u></td> </tr> <tr> <td style="text-align: center;">Estimate Living HIV/AIDS Cases</td> <td style="text-align: center;">59,500 134,303</td> </tr> <tr> <td style="text-align: center;">Reported HIV/AIDS Cases</td> <td style="text-align: center;">44,250 110,994</td> </tr> <tr> <td style="text-align: center;">Estimated Undiagnosed HIV/AIDS Cases</td> <td style="text-align: center;">12,800 23,309</td> </tr> </table> <p>Mr. Perez discussed the following charts and graphs:</p> <ul style="list-style-type: none"> • Annual Diagnoses of AIDS & HIV Infection and Deaths of Persons with HIV Infection, L.A. County, 1991-2011 	<u>L.A. County</u>	<u>California</u>	Estimate Living HIV/AIDS Cases	59,500 134,303	Reported HIV/AIDS Cases	44,250 110,994	Estimated Undiagnosed HIV/AIDS Cases	12,800 23,309	
<u>L.A. County</u>	<u>California</u>									
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<p>V. DIVISION OF HIV & STD PROGRAMS CONTINUED</p>	<ul style="list-style-type: none"> • <i>Number of Persons Living With HIV and AIDS, by Year – L.A. County, 1991-2011</i> • <i>AIDS Cases, AIDS Deaths and Persons living with AIDS, by Year – LAC, 1987-2008</i> • <i>Estimated Number of New HIV Infections in L.A. County, 2007-2009</i> • <i>Persons Living with HIV/AIDS in LAC per 100,000 population by Race/Ethnicity, as of December 2010</i> • <i>Proportion of LAC PLWH/A Cases by Race/Ethnicity & Diagnosis Year, 2001-10</i> • <i>Percent of HIV/AIDS Diagnoses Among Adults/Adolescents, by Transmission Category and Year of HIV Diagnosis, L.A. County, 1992-2010</i> • <i>Trend in Proportion of Persons Living with AIDS by Age, 2001-2010</i> • <i>Trend in Proportion of Persons Living with HIV by Age, 2002-2010</i> <p>What's Driving New Infections?</p> <ul style="list-style-type: none"> • <i>High levels of undiagnosis</i> • <i>Social and sexual networks</i> • <i>Drug use, especially, alcohol and meth use</i> 	

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<p>V.DIVISION OF HIV & STD PROGRAMS CONTINUED</p>	<ul style="list-style-type: none"> • Community viral load • Poor economic conditions • Homophobia, stigma, shame • Uneven HIV disclosure patterns <p>Persons Living with an HIV Diagnosis in 2008, by Zip Code, L.A. County, CA</p> <p>AIDSvu is an interactive, online map that allows users to visually explore the HIV epidemic in the U.S. alongside critical resources such as HIV testing center locations.</p> <p>Spectrum of Engagement in Care in the United States - Mr. Perez discussed the graph as follows:</p> <p>Number of Individuals:</p> <ul style="list-style-type: none"> • HIV Infected – 1,106,400 • HIV Diagnosed – 79% • In HIV Care – 59% • Retained in HIV Care – 40% • Need ART – 32% • On ART – 24% • Undetectable VL – 19% 	

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<p>V.DIVISION OF HIV & STD PROGRAMS CONTINUED</p>	<p>Ryan White "In Care" Treatment Cascade, FY 2010</p> <p><i>Number of Individuals:</i></p> <ul style="list-style-type: none"> • RW System of Care – 19,228 • RW Medical Care – 14,753 • On ART – 90% • Retained in HIV Care – 87% • Undetectable VL – 75% <p>Summary: Not Linked to Care in LAC</p> <ul style="list-style-type: none"> • Characteristics/factors associated with being unlinked to care: African American and Latino, Homeless, Transgender, and Tested at Mobile Testing Unit (vs. fixed) • Only 2/3 of those diagnosed with HIV in LAC are linked to care within 1 year of diagnosis • Improving linkage to care=strategy to improve individual health outcomes as well as reduce HIV transmission <p>Policy Questions</p> <ul style="list-style-type: none"> • Should antiretroviral treatment be recommended for all persons with diagnosed HIV infection regardless of CD4 level? 	

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<p>V.DIVISION OF HIV & STD PROGRAMS CONTINUED</p>	<ul style="list-style-type: none"> • <i>Should we offer monetary incentives to persons who test HIV-positive to encourage them to access HIV treatment?</i> • <i>Should we implement mandatory opt-out HIV testing in California for all persons ages 13-64, similar to the mandatory opt-out provision for all pregnant women in California?</i> • <i>Should all health plans in California be compelled to pay for HIV testing?</i> • <i>Should we encourage HIV-negative persons at high-risk for infection to take a daily antiretroviral to avert new infections?</i> • <i>Should all health plans be compelled to pay for biomedical interventions?</i> 	
	<p><i>Vice-Chairperson Dowling stated that Mr. Perez and staff still have challenges in some communities, but has also made some progress.</i></p> <p><i>Chairperson Bholat asked how many patients does MLK-MAC Campus see. Mr. Perez indicated about 960 patients, and the MAC Center is located on the same lot as the new MLK Center for Public Health and is run by Dr. Wilbert Jordan. The current investment is \$1.6 million in the MLK-MAC clinic.</i></p> <p><i>Mr. Perez explained the mental health provider is Department of Mental Health (DMH). There are changes happening behind the scenes, but HIV Program</i></p>	

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<p>V.DIVISION OF HIV & STD PROGRAMS CONTINUED</p>	<p><i>is trying to make it work seamless as humanly possible for the clients.</i></p> <p><i>Chairperson Bholat stated her real concern is DMH, because of the default for all Medi-Cal managed care health plans, default for all of this and the services delivered and it's a terrible situation for patients. Mr. Perez indicated DMH probably is only going to directly treat the most acute patients in the system and everyone else is going to end of leaning on community-based health providers.</i></p> <p><i>Chairperson Bholat asked Mr. Perez what is the impact of HIV in the Long Beach Public Health Department. Mr. Perez indicated that Long Beach has the second largest historic HIV epi center in the county with a very large number of gay men. The HIV Program has changed their HIV testing relationship with the city of Long Beach to adopt the philosophy of L.A. county.</i></p> <p><i>The Commission thanked Mr. Perez for an excellent presentation.</i></p>	

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<p>VI. ELECTION OF OFFICERS</p>	<p><i>Chairperson Bholat nominated Vice-Chairperson Dowling as Chairperson, and the Commission unanimously approved by a show of hands. Vice-Chairperson Dowling nominated Commissioner Champommier as Vice-Chairperson, and the Commission unanimously approved by a show of hands. Both will assume their respective duties effective January 1, 2013.</i></p> <p><i>The meeting adjourned at 11:04 a.m.</i></p>	