1. **CALL TO ORDER:**

   Dr. Horwitz called the meeting to order at 2:02 p.m.

   Mr. Schlueter called the roll as follows:

   Dr. Brumm  
   Dr. Fulginiti  
   Ms. Gonzales - absent  
   Dr. Horwitz  
   Ms. Trowbridge

   A quorum was established.

2. **MINUTES ADOPTION**

   Adopt Community Health Advocacy Committee September 28, 2011 Minutes

   The motion was made and seconded (Fulginiti/Brumm) that the September 28, 2011 Community Health Advocacy Committee Minutes be adopted as written. The motion carried.

3. **DISCUSSION OF POSSIBLE HEALTH ADVOCACY INITIATIVES AND DECISION ON WHICH ITEMS TO RECOMMEND TO THE FULL BOARD FOR ACTION**

   Dr. Horwitz provided a handout which listed five potential health advocacy initiatives. He added that a sixth item would be attending the monthly Arizona Local Health Officers’ Association (ALHOA) meetings in Phoenix to gather information on what issues other communities face and how they address those issues. Health Department Director Sherry Daniels stated that it is interesting how different the various Arizona county Health Departments are in structure. Initial discussion included that the Committee needs to decide if it wants to continue and decide specifically on what it wants to accomplish, or disband.

   Item 1 on the handout was “Community Information Initiative” and was discussed as a more short-term or quicker turnaround educational initiative to educate the public on current health issues such as the health risks associated with eating raw oysters or the current problem with Rocky Mountain Spotted Fever. Committee members indicated they don’t feel they are informed well enough on these types of issues as they arise. In response Ms. Daniels said she would work on a communications plan for the Board of Health for the next meeting. This initiative would require rapid dissemination of
information to the Board to allow them to provide input in a timely manner. Ms. Daniels said that it would be helpful to have a quote from a member of the Board on some issues. She also briefly discussed the internal process to craft, vet and clear a message for release to the public or media.

Item 2, “Identification of Specific Longer Lasting Infectious Disease Occurrence in our County,” was discussed in conjunction with item 1 and was generally consider by the Committee and Ms. Daniels as a viable initiative. Ms. Daniels indicated that this initiative was an area wherein the Department could use the Board’s help and in which the Board could provide an extra authoritative voice.

Regarding item 3, “Deficiencies in Department of Health,” Ms. Daniels said that getting the job done isn’t always about the number of people. She gave an example of Consumer Health and Food Safety (CHFS) consistently being short staffed and unable to do all their inspections, but with different management, a review of program workload distribution and reorganization CHFS is now more efficient. Dr. Horwitz asked if Ms. Daniels was willing to bring deficiencies to the Committee as they arise and she was willing.

The discussion on item 4, “Legislative Issues,” acknowledged that the recent decision to have a legislative update as a standing item in the regular Board meeting will create a forum for the Board to provide input on legislative issues as they arise. Ms. Daniels pointed out that the legislative cycle hasn’t started yet and said she would like to review issues from the last legislative session.

Item 5, “Partnerships,” was only touched on briefly due to time limitations.

4. COMMUNITY HEALTH ADVOCACY COMMITTEE MEETING SCHEDULE

Dr. Horwitz established that the next Committee meeting will be at 2:00 pm prior to the next regular Board of Health meeting, the date of which is to be determined in the regular Board meeting.

5. CALL TO AUDIENCE

There were no speakers from the audience

6. ADJOURNMENT

The meeting adjourned at 3:00 p.m.