1. CALL TO ORDER
Dr. Horwitz called meeting to order at 3:04 P.M.

ATTENDANCE:
Mr. Bin An - Absent
Dr. Matt Heinz
Mr. Rene Gastelum
Mr. Charles Geoffrion, Vice President
Ms. Mary Lou Gonzales
Dr. Paul Horwitz, President
Mr. Mike Humphrey
Dr. Kathryn Kohler
Mr. Miguel Rojas - Absent
Dr. Gail Smith
Ms. Carolyn Trowbridge

A quorum was established (9)

Non-Board Members
Dr. Theresa Cullen, Pima County Public Health Director

Presenters
Dr. Donald Gates, Pima County Health, Business Operations Manager
Ms. Jennie Mullins, Pima County Health, Administrative Support Services Manager
Ms. Amanda Monroy, Pima County Health, Special Staff Assistant

2. PLEDGE OF ALLEGIANCE
Due to Teleconference Meeting the Pledge of Allegiance was not conducted.

3. MINUTES ADOPTION
• Adopted Board of Health Minutes for March 24, 2021.
  The motion was made and seconded (Dr. Kohler/Dr. Smith) that the March 24, 2021, Board of Health Minutes be adopted. The motion passed unanimously.

• Adopted Board of Health Budget Subcommittee Minutes for April 21, 2021.
  The motion was made and seconded (Mr. Geoffrion/Ms. Trowbridge) that the April 21, 2021, Board of Health Budget Subcommittee Minutes be adopted. The motion passed unanimously.

4. CALL TO AUDIENCE
• Dr. Horwitz invited anyone attending remotely on the call who is a non-member, or a public citizen, that they now have the opportunity to speak for 2 minutes. There were no participants.

5. DIRECTOR’S UPDATE
• Dr. Cullen provided updates on COVID:
  o Case number remains stable at about 50-60 cases per 100,000 per week.
Hospitalization rates indicate that about 5% of cases are hospitalized.
- Mortality rate stayed pretty stable at 2%
- We are plateaued at this time – the number of cases and positivity stays about the same – so if we stay stable, we are probably okay.

- COVID testing continues at the Tucson International airport site, the downtown Tucson site and at the Paradigm location on Grant Road.
- Dr. Cullen provided updates on COVID vaccination numbers provided on the State database:
  - The State database is confusing regarding the number of vaccines that have been administered in Pima County.
  - The vaccine prioritization numbers on the State site are the number of recipients of vaccinations, regardless of where they were given in the State.
  - State vaccination numbers do not include the Veteran’s Administration numbers or DOD numbers, and it is unclear whether they include all the Tribal numbers.
- Dr. Cullen gave a general update on the vaccination rate in Pima County, and noted that we’ve made a significant increase in the number of vaccinations administered. The numbers provided are:
  - There are roughly 865,000 people in Pima County who are 16 years old and over.
  - As of April 27, 2021, the number of vaccinations given in Pima County is about 482,000.
  - 80% of people aged 80 and over are vaccinated.
  - 57% of people aged 18 and over have gotten 1 shot.
  - Approximately 36% of the community aged 16 and over are fully vaccinated.
  - To get to a 75% vaccination rate, we need to do 649,000 shots:
    - If the Johnson & Johnson (J&J) one-shot vaccine is used, we need about 148,000 shots administered.
    - If Moderna or Pfizer two-shot vaccines are used, we need about 300-350,000 more shots administered to get to 75%.
- Dr. Cullen advised that two FEMA mobile POD’s are arriving this week. Each is geared to do 200-250 shots over 6 days per week. The POD’s will work at a specified site for 3 days then move to a new location for 3 days. The FEMA POD’s will be here 6 weeks, so at roughly 500 shots per day, 6 days per week, that’s about 18,000 more shots administered. More will be given if it is possible to do so. FEMA POD’s will administer both Moderna and J&J vaccines.
- Dr. Cullen noted that Pima County Health Department (PCHD) continues to be very, very aggressive with our mobile POD’s. There will be about 12 mobile POD’s in the next 7 days at different locations around the County.
- Dr. Cullen indicated that PCHD is in almost every high school providing Moderna shots for graduates due to the age restriction of age 18 and over. PCHD is working with the University of Arizona (UA) to see if we can get access to Pfizer, and we are awaiting delivery this week of a low cold freezer to allow storage of the Pfizer vaccine.
- Dr. Cullen advised that PCHD is out there and leaving no stone unturned in getting vaccines into the community. While the Banner/Kino vaccination site is shutting down in June, PCHD has opened up the Kino Event Center as a vaccination site; this is where Paradigm previously was doing COVID testing. El Pueblo has opened up because of other places shutting down. PCHD has an agreement to go in the Foothills as well. PCHD will keep El Pueblo and Kino Event Center available for second shots of Moderna.
- Dr. Cullen noted that PCHD just started VAXChallenge.org, which is a website hosting a vaccine challenge for 16-24 year olds, where prizes can be won to try to engage that age group. Once that challenge is over, there are plans to begin another one.
- Dr. Cullen mentioned that the vaccination problem is no longer that we don’t have enough vaccine; it is that we need more arms to put the vaccine in.
Mr. Humphrey inquired if anybody, any age, any health condition can get a vaccination now. Dr. Cullen advised that anyone aged 16 and over can get the vaccination now, noting that 16 and 17 year olds can only have Pfizer. Dr. Cullen also noted that vaccine emergency authorized use approval for down to age 5 years old is expected to come in the next 3-4 months.

Dr. Smith inquired if PCHD is having much issue with people who are refusing to get vaccinated, or who do not trust the vaccine. Dr. Cullen replied that some of the issue is still lack of access, and that the more PCHD goes into the community that will change. Dr. Cullen also noted that there are definitely people who don’t want to get, or think they need, the vaccine. Those are issues PCHD is trying to address through increased communications pushes on social media, as well as community events and campaigns like the VAX After Dark recently held downtown on Fourth Avenue. Dr. Cullen advised that PCHD had set aside a couple hundred thousand dollars for the Communications department to do these strategic communications campaigns in the community.

Dr. Heinz asked what is happening with migrants getting COVID vaccinations. Dr. Cullen advised that PCHD has arranged for BinaxNow testing in Ajo, and have a contract in place to do testing at Casa Alitas. PCHD has also asked the Casa Alitas medical staff to give a sense of what vaccines might be acceptable to the migrant community, and hope to initiate vaccinations there soon.

Mr. Humphrey asked if there is a sense of how close we are getting to herd immunity based on the numbers vaccinated and how many people have had COVID. Dr. Cullen responded that the belief is that about 50% of people are asymptomatic, and a current study indicates that asymptomatic people may have antibody protection for a very limited time. Dr. Cullen thinks that the only people who have significant immunity are people who were fairly ill, or ill enough to have symptoms, but the problem is not knowing which symptoms indicated immunity, so we are not relying on the percent of people infected to indicate we have reached herd immunity.

Dr. Horowitz asked if an after-action report is being pursued. Dr. Cullen advised that yes, an after-action report has been started based on preliminary data, and that PCHD has entered into a small contract for a more objective evaluation of the data. Additionally, PCHD is preparing a recovery and resiliency plan, and Dr. Cullen hopes to share a draft of that with the BOH once it is available.

Dr. Horowitz noted that he is very concerned about the amount of non-compliance he is seeing in the community at this time, and asked what the Health Department could do in the future to ensure enforcement of laws passed if this type of situation ever happens again. Dr. Cullen noted that PCHD has a public health advisory that came out last week that addresses mask compliance, allowing most indoor and outdoor events to increase to 30% occupancy, and allows the number of people gathered to reach 250 without getting additional consent from the County. Dr. Cullen noted that the public health advisory will be modified once PCHD can give guidance that is not complicated to interpret.

Dr. Cullen reported that PCHD has hired a lab person who will be able to help train staff for venipuncture, which will positively impact syphilis screening during STI testing.

Dr. Cullen thanked the BOH for their support and commitment to the recent salary evaluation that was completed and allows for salary adjustments for nursing staff such as licensed, independent nurse-practitioners, public health nurses, and lead nurses.

Dr. Cullen advised that PCHD will be coming out with a new opioid update, and is in the process of developing a more aggressive Narcan distribution for the County that will rely on communication and cooperation from the clinical community.

Dr. Horowitz inquired if the Sheriff’s department is now carrying Narcan, as in the past they were very reluctant to do so. Dr. Heinz later received a reply text from Sheriff Nanos that confirmed that patrol deputies do carry Narcan.
Dr. Cullen spoke about grant funding opportunities for PCHD. There are two non-competitive grant applications that are due within the next 10 days, so staff is rapidly responding to those. An application was also submitted for a CDC competitive grant on literacy, as well as another grant for community health workers that is due the second week of May. Additionally there is a climate change grant that is being submitted with the intention of addressing the impact of heat in the city of Tucson, which is the third fastest warming city in the United States.

6. BUDGET ADVISORY SUBCOMMITTEE

Dr. Horowitz thanked all the members of the Budget Advisory Subcommittee – Mr. Charles Geoffrion, Mr. Rene Gastelum, Ms. Marylou Gonzales, Dr. Gail Smith, and Ms. Carolyn Trowbridge – as well as Dr. Donald Gates and Ms. Suzanne Goodman for their participation. He applauded the great job done by all in a very short amount of time, and advised that the budget process will begin much earlier next fiscal year.

Mr. Geoffrion advised that the subcommittee discussed a number of critical budget concerns such as addressing salary needs over two meetings in April. He noted that while the subcommittee did not have the benefit of having actual numbers to work with during the process, a recommendation has been decided upon to send to the BOS for the PCHD FY21/22 budget.

Dr. Horowitz noted that with the help of Dr. Donald Gates, a general letter of recommendation regarding the budget has been drafted to send to the BOS, was included as a handout for this meeting, and will be discussed following Dr. Gates’s presentation.

Dr. Gates presented the Pima County Board of Health Budget Update slide presentation to the board, noting that the numbers are still subject to change but should be assumed to be fairly solid:

- The primary Health Fund Expenditure Budget slide shows that the budget for FY2022 is $20,724,753.00, which is a full 25% higher than FY2021 budget. This notes a 34% increase in personnel from FY2021 to just under $15 mil, and also an increase for Supplies and Services at just under $6 mil. Personnel full time equivalents are increasing by 16%, which includes 32 new permanent Health Fund positions.

- The Health Fund Revenue Budget slide consists of Direct Revenue and General Fund Subsidy, which is projected to be $15,282,150.00 for FY2022. Direct revenues are decreasing slightly from FY2021, but the General Fund Subsidy has returned to effectively historic levels at just under $11 mi, which is a 45% increase over FY2021.

- The Health Fund Net Budget slide indicates that the net impact of revenues and expenditures is a deficit of $5.4 mil. Additionally there are transfers out for matching funds for grants, etc., of approximately $2.4 mil, which brings the net deficit for FY2022 to $7.8 mil. Previously the projected budget deficit was $9.5 mil, so despite the significant increase in the expenditure budget, the projected deficit is actually going down. This will exhaust the Health Fund balance as was previously discussed.

- The Consolidate Health Budget slide presents both the Health Fund and Grant Fund numbers for a complete picture of the FY2022 expenditure and revenue budgets. The total expenditure budget across the Health and Grant fund is almost $36 mil, and the revenue budget is approximately $29 mil, leaving about a $6.8 mil deficit.

- The finals slide provides a comparison of funding sources for public health from a national versus Pima County perspective. Nationally, local funding, state funding and federal funding make up the bulk of public health funding sources, followed by Medicare/Medicaid, Direct Revenue and Other types of funding. In Pima County the bulk of public health funding is through local funding and federal funding (which includes federal grants routed through state and other agencies), followed by Direct Revenue and
State funding, plus less than 1% Other funding, and zero Medicare/Medicaid funding because Pima County does not operate those directly.

- Mr. Humphrey inquired if State funding is based on per capita, as Pima County has roughly 20% of the State’s population.
- Dr. Gates explained that 11% of PCHD budget comes from the State, not that Pima County receives only 11% of the State’s budget. There are several direct proportional elements involved, as well as competitive elements that local health departments compete against other agencies for funding.
- Mr. Geoffrion asked if the numbers presented today are sufficient to make the recommendation on behalf of the BOH.
- Dr. Gates indicated that he believes these numbers are very firm, but that there always remains the opportunity for final modifications once the recommendation is submitted.
- Mr. Geoffrion moved that the recommendation letter and the data be approved and moved forward to the BOS. Dr. Kohler seconded the motion.
- Dr. Cullen commented that she is concerned that this budget gets PCHD where it needs to go. Part of the problem is the uncertainty of the grant money in the budget. Dr. Cullen feels it is important to note that if the grant funding is not there, the need does not go away. Dr. Cullen suggested amending the Federal funding line to read Federal (Grant) funding so that people recognize that need. She indicated that we will ask Administration about that.
- Dr. Gates suggested the board consider an edit to the second sentence in the letter of recommendation so that it reads, “We are pleased to see the increased County investment” or “We are pleased to see the increased local investment” to indicate the difference between local contributions and the Federal, or grant, contribution.
- Dr. Horowitz asked Mr. Geoffrion if he wishes to accept a friendly amendment to his motion.
- Mr. Geoffrion agreed to the rewording, and Dr. Kohler seconded the amendment. Dr. Horowitz called for the vote on the motion, which passed unanimously.
- Ms. Trowbridge noted that public health is not just a local problem but a national problem, and we need lobbying groups to push the fact that to promote public safety, we have to help people get healthy and keep people healthy. Dr. Horowitz reminded the board that we do employ a State lobbyist, and that maybe the BOH can push the Administration to place our concerns up to the State.

7. ETHICS COMMITTEE UPDATE – STANDING ITEM
- Ms. Jennie Mullens provided key updates from the Ethics Committee at the request of Dr. Cullen.
- Ms. Mullens advised that the next Ethics Committee meeting is scheduled for tomorrow and she is just finalizing the agenda.
- Feedback was requested at the last meeting on how the member’s thought the Ethic Committee was going, and the main feedback was very positive and centered around the value of having such a good, diverse group representing various sectors and perspectives in the County.
- An overview of the communications strategy was presented that discussed how the department and the County is moving forward to address inequities in access to vaccine uptake, as well as vaccine hesitancy.
- The community engagement plan was shared again, and the committee was advised that the Community Engagement Committee is actually convening.
- There was a discussion regarding the impacts of the pause of the J&J vaccine and what that was going to do on the roll-out. There were also concerns around what is happening regarding continuing vaccinations for people experiencing homelessness.
• There was a request from the members to get an update on the data around health disparities in vaccine uptake, especially in regard to racial and ethnic populations in the County. That data update will be given at the next meeting.

• Dr. Horowitz inquired as to what percentage of the members of the Ethics Committee participated in any one meeting. Ms. Mullins believes that is probably about 50% of the full membership, or roughly about a dozen people.

• Mr. Humphrey asked if the disabled community is included in discussions about groups included in health equity, because he has had reports that some members of that community feel they are being ignored in vaccine distribution. The perception is that there wasn’t any emphasis placed on disability when the first shots were being given.

• Ms. Mullins said that there was some prioritization for people with disabilities living in licensed settings such as long term care in Priority Group 1A. The Ethics Committee was really quick to work on amending the guidance for Group 1A to include people living with disabilities in the community. She believes Pima County was one of the first counties in the state to upgrade that and prioritize people with disabilities receiving long term care and services in the home, and other congregate settings.

• Dr. Cullen added that the FEMA POD’s will include sign language interpreters and other support for the disabled. She agreed that early on, perhaps in the first 3-4 weeks, the disabled community was not made a priority, but that Pima County got ahead of that before almost anyone else did, because the Ethics Committee brought it up.

8. DECLARING RACIAL & ETHNIC INEQUITIES & INCOME INEQUALITY IN PIMA COUNTY TO BE A PUBLIC HEALTH CRISIS – STANDING ITEM

• Dr. Cullen asked Ms. Amanda Monroy to give a brief update to the BOH on what we’ve been doing to address racism and equity.

• Ms. Monroy noted that the resolution had a specific action step around ensuring equity in COVID-19 pandemic response and recovery. Ms. Monroy advised that we are starting the work of the Round Recovery Portion and making sure that equity is built into the forefront of that, and are making sure we’re looking at the structural systems in place that may have been perpetuating the racism and other problems that have led to those inequities.

• Ms. Monroy advised that today was the first meeting of the Community Engagement Committee. We are looking for a very diverse group of community voices to make sure we’re highlighting what the community has identified as the need based off COVID, especially when it comes to recovery.

• Ms. Monroy pointed out that we’re blessed with all the grants, which will enable us to hit the group and use the pandemic as a spring to getting the equity work done that we know the County needs.

• Dr. Cullen added that we have three health equity positons that are going to be filled. Dr. Gates confirmed that the final approval for those positions was done in February, and the positions became created and available in late March.

• Dr. Cullen also noted that in addition to the grant funding that is expected, it is anticipated that we will have a funding cycle with community-based organizations that can help support this work.

• Mr. Humphrey inquired if these health equity specialists will included researchers among them, and if health equity information will be made available to the public.

• Dr. Cullen noted that there have been multiple discussions with the UA School of Public Health in the last few weeks about ensuring that we have adequate biostatisticians and EPI statisticians on board, either through a contract with the University, or through us, to be able to do the data sets. She also noted that the one request we have repeatedly gotten is that availability of data for the public, so the intention moving forward is that we would make
increasing data available. There is also discussion with the UA as to whether we could be a fellowship.

9. **SUMMATION OF ACTION ITEMS & PROPOSAL OF FUTURE ITEMS**
   - Dr. Horwitz reminded the board members to send him an email and ask to have the item put on the agenda. A one or two week notice is required to get an item on the agenda.
   - Dr. Heinz inquired about getting something on the next meeting agenda to discuss the obesity crisis. Dr. Horowitz advised Dr. Heinz to email him and he will get it on the agenda.

10. **ADJOURNMENT**
    The motion was made and seconded (Mr. Gastelum/Ms. Trowbridge) that the April 28, 2021 meeting adjourn. Motion carried unanimously.

    The meeting adjourned at 4:32 P.M.

    The next meeting is scheduled for April 28, 2021, at 3:00 P.M.