Pima County Board of Health Minutes
March 24, 2021
Teleconference / MS Teams Meeting / In-person
Abrams Building, Room 2359
3950 S. Country Club Road
Tucson, Arizona 85714

1. CALL TO ORDER
Dr. Horwitz called meeting to order at 3:00 PM

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

A quorum was established (7)

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

Presenters
Dr. Donald Gates, Pima County Health, Business Operations Manager
Ms. Crystal Rambaud, Pima County Health, Vaccine Preventable Disease Program Manager
Ms. Jennie Mullins, Pima County Health, Administrative Support Services Manager

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

3. MINUTES ADOPTION
• Adopted Board of Health Minutes for February 24, 2021.

The motion was made and seconded (Mr. Rojas/Ms. Trowbridge) that the February 24, 2021, Board of Health 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 advised that she is presenting on 3 specific topics: Death Cases and Hospitalization rate, Vaccines, and Grant Opportunities.
• Dr. Cullen reviewed the changes to the Pima County COVID-19 Progress Report, and the changes to the 3 components: Disease Data, Healthcare System Availability (or clinical response), and Public Health Tracking and Prevention. One significant change has been a
downward trend in Disease Data. Pima County has moved to yellow, which indicates less than 100 cases per 100,000, and has held there for about 10 weeks. Pima County is currently running about 65 cases per week, which obviously changes on a day-to-day basis.

- Dr. Cullen noted that positivity rates continue to go down — we are at about 5-6% - and that the COVID-like illness rate is down around 2-3%. The number of cases continues to do well. We are still consistently seeing some deaths every day.
- Dr. Cullen called the members’ attention to the Pima County COVID-19 Deaths, Cases, and Hospitalizations Report that was sent out prior to the meeting. She noted that we have increased ICU and hospital-based capacity due to the active number of cases being down. There is adequate PPE and adequate lab access from a public health perspective. Because the case number is low, we are able to do EPI cascade — test, case investigate and contact trace — within about 24-48 hours each, which is really good news.
- Pima County has 8 cases of the UK variant, and have identified a small cluster of 3 of those 8 that appear to be connected. Other cases of the UK variant have been discovered by the University of Arizona but have not been reported to the State because they are part of a research protocol. Individuals are not advised that they have been sequenced as a UK variant per guidance from the Centers for Disease Control (CDC). However, we always go back and try to look for additional information on those cases, a second case investigation to some extent. There is no data on how many cases of the UK variant involved hospitalization, but Dr. Cullen will double check and report back on that.
- Dr. Cullen advised that schools have reopened for the most part. There were 3,650 cases identified to Pima County by the K-12 system between August 5, 2020 to March 23, 2021, and those cases could be private, charter, parochial and/or private schools. The vast majority of cases at schools remain related to sports events. She noted that K-12 cases seem to still have a downward trend, but Pima County continues to track school cases very closely.
- Dr. Cullen mentioned that our Schools Assistance Team has 6 people working with schools to ensure they have appropriate mitigation, guidance and other resources. One of the more interesting opportunities they have instituted are student-centered listening sessions related to Prom and dances in order to help determine safe ways for schools to embark on those kind of events with guidance from the Health department. The listening sessions are a pretty novel way to try to get the information, and no one else in the State is doing this at this time.
- Dr. Cullen next discussed vaccinations. Pima County is over 410,000 vaccines currently, and expects to hit 450,000 by the end of March, which is significantly greater than our original audacious goal of 300,000 at the end of March. Overall vaccinations continue to do well.
- Pima County engages with community partners to set up local mobile clinics based on a data predictive of what is a vulnerable community, and are seeing increased utilization of those local clinics.
- Dr. Cullen discussed the State’s opening of state POD’s, and some pharmacies getting a federal allocation, to people 16 and older. The requirement is that 16 and 17 year olds need to get Pfizer vaccine only, which is available in Pima County at the State’s University of Arizona POD. The only other known location in Pima County distributing the Pfizer vaccine is the County-supported Banner POD, but Pima County is not opening that site to 16 and 17 year olds unless they are essential workers or have chronic disease.
- Dr. Cullen noted that Pima County is limiting opening vaccinations up to those 16 and over to individuals with chronic disease in the hopes that this group will be able to get vaccinated a bit earlier than others in that age group.
- Dr. Cullen mentioned that Pima County had no early indication that the change was going to occur, and received notification via the Governor’s press conference only. She did note that
once there is more vaccine availability, Pima County wants to align with the State, but that decision is not reflective of what we know about Pima County’s needs.

- Mr. Humphrey inquired as to the status of the 335,000 FEMA vaccines that Pima County is trying to get. Dr. Cullen discussed her recent interaction with the FEMA acting Region 9 Director, and advised that FEMA is very supportive of offering a POD that is partly driven by their wanting to do a pilot evaluation related to vulnerable populations. But FEMA always works through the State, and although initial feedback indicated that the State was supportive of the POD, the decision was made by Governor Ducey that Pima County would not get a FEMA POD. However, it appears now that Governor Ducey is reconsidering that decision.

- Supervisor Heinz noted that Mr. Huckelberry confirmed that FEMA has historically worked directly with Pima County on other issues such as disaster relief, so it is possible for FEMA to still set up the federal POD site with special exception. Supervisor Heinz mentioned that pressure will continue to be put on the congressional delegations, as well as with the administration directly to make sure that the FEMA POD happens.

- Dr. Horowitz inquired about the Johnson & Johnson (J&J) vaccine, asking if any of that vaccine was being reserved for the less mobile and/or underserved populations? Dr. Cullen responded that the J&J vaccine is being used for certain populations such as the jail population, and people that are homebound.

- Supervisor Heinz asked Dr. Cullen what the rough numbers are for the various populations being added in the vaccination eligibility expansion. Dr. Cullen advised that these are large numbers. For instance, front line workers will probably be another 120,000-140,000 people, and those in the 16 year old and older age group and have a chronic disease or other risk factor, the estimate is another 250,000-300,000. Dr. Cullen noted that the State POD at the University of Arizona will allow anyone aged 16 years old and over, while Pima County is currently limiting that to those 16 years old and older with chronic disease. The point of this is not to confuse the public, but to let the people who have a chronic disease have some accelerated access. The ultimate hope is that within 4-5 weeks, Pima County can be aligned with the administration’s directive that by May 1st, everybody should be able to get a vaccination. There is tremendous need, and there will be tremendous pressure on Pima County to open vaccinations up for everyone, but the issue continues to be vaccine supply.

- Dr. Cullen noted that there are multiple ways to get immunizations. There is the State portal to register for the University of Arizona POD; there are the County portals for Banner and TMC/TCC; there are multiple pharmacies that are getting a supply from the federal distribution. The Federally Qualified Health Centers have gotten a supply from Pima County; El Rio, United Community Health Centers, Desert Senita and Marana Health Center all have a supply. The Veteran’s Administration is open to age 18 and up. And Pima County is providing pop-up clinics in certain communities to increase vaccinations in those areas not engaging in getting vaccines. The Hispanic community is an example where the percentage of those vaccinated had been stuck at 14.4-14.5%, but due to concerted strike efforts there has been a significant increase to 15.4% of that population being vaccinated.

- Dr. Cullen discussed several funding opportunities available from the American Rescue Act:
  - One is a non-competitive grant related to diversity and equity that the County is eligible for, meaning we have to meet the requirements of the application but we are guaranteed we will get some funding from that. It’s geared to respond to equity and diversity and inclusion issues related to COVID. The estimate is that Pima County would get $4-5 million over a two-year period with the initial money flowing in June. We put a letter of intent in for that.
  - Another large grant that is available right now related to health literacy and equity. Pima County is working with a few other partners to look at that, and consider applying for that. There is funding in the bill for public health training and
strengthening the public health infrastructure through human resources, and we are hopeful that some of that funding will be available to us.

- In addition, there are many other areas where funding has been allocated, including SNAP; a build-up of WIC – a 25% add-on for WIC; pre- and post-partum resources; behavioral health; mental health; substance abuse.

Dr. Cullen noted that we are hopeful that, at the time we are engaging and developing recovery and resiliency plan for Pima County, we will concurrently be able to leverage non-County resources to help us develop the appropriate infrastructure that we will need as we move forward with that.

- Ms. Trowbridge asked what, if anything, that the BOH could do to assist the effort? Dr. Cullen suggested that a letter of endorsement for increasing the vaccination supply in the County, as well as including support for the FEMA offer, would be helpful.
- Dr. Horowitz asked Supervisor Heinz if he felt it would be useful for the BOH to write a letter to the BOS.
- Supervisor Heinz agreed that having the unanimous support of the BOH would be helpful.
- Mr. Rojas noted that it would not hurt to carbon-copy the letter to our congressional delegation and let them know that the BOH is serious about helping our residents, and that the FEMA POD is the way to do it.
- Mr. Rojas moved that the BOH direct Dr. Horowitz to formulate a letter to Dr. Cullen that the BOH is in full agreement that Pima County should get the 220,000 vaccines from FEMA to be distributed as soon as possible. Dr. Smith seconded the motion. The motion passed unanimously. Dr. Heinz requested that the letter be copied to Governor Ducey, and Mr. Rojas accepted the amendment to the motion.
- Mr. Rojas asked if Dr. Cullen has been notified about what is happening in regards to the juveniles coming from Nogales and Yuma to the Pima County Juvenile Court Center. Dr. Cullen advised that the PCHD is working with Casas Alitas to make sure that BinaxNow COVID-19 testing, and/or appropriate PCR COVID-19 testing, is available for both staff and juveniles. And the decision was made to have onsite COVID-19 vaccination available for staff as the facility is considered high risk.

6. **WHITE PAPER – AN EVALUATION OF THE US GOVERNMENT’S RESPONSE (FED, STATE, COUNTY) TO THE COVID-19 PANDEMIC:**

- Dr. Horowitz advised that he has spoken to Dr. Cullen about evaluating the government’s response to the COVID-19 pandemic. He would like the Health Department to consider all levels of the response - federal, state, and local – to determine what was, and wasn’t, done well, to learn from this whole experience. He noted that we could certainly go through something like this again at some point, and while people have done a great job, there are probably things that could have been done differently, and the more we learn about that, the better.
- Dr. Cullen agreed that this is really critical. The Health Department has done after-action reports pretty consistently with our response, but they have focused primarily on the local response rather than identifying impediments and/or attributes from the federal or state level. She is committed to doing the evaluation, but is not sure when she will be able to finish it. Dr. Horowitz offered to assist with the white paper in any way he is able to.

7. **FRONT LINE HEALTH DEPARTMENT WORKERS’ SALARY REVIEW**

- Dr. Gates discussed the issue regarding the Health Department’s ability to recruit and retain quality front line, critical, and nursing staff. Confirmation has been received that the nursing staff, which includes nurse practitioners, RN’s and PHN’s, will be undergoing a modified salary study per the County Administrator.
• Dr. Gates reminded the board that the Pima County Human Resources (HR) department is responsible for salary studies for the County. Traditionally they compare like classification and like agencies, where they would look at similar classifications of nurses in other public health departments, generally those of similar size or similar compositions to Pima County. In a modified salary study, comparison is made to similar duties, and is somewhat less restricted by agency. New senior staff at the HR department has championed this, will be carrying it through with a detailed comparison to salaries in our region; a response is anticipated within the next two months.

• In addition, Dr. Gates mentioned that salary studies have been requested for 3 other broad groups of employees in the Health department, starting with the registered dieticians; the environmental health staff – those are our inspectors and supervisors in Consumer Health and Food Safety; and our communicable disease investigators and epidemiologists.

• Dr. Gates also mentioned that a comprehensive salary comparison to other departments within the County is on the horizon for the Health Department to hopefully identify disparities and begin the process of redress.

8. BUDGET SUBCOMMITTEE UPDATE
• Mr. Geoffrion began by thanking Ms. Trowbridge, Ms. Gonzales, and Dr. Smith for participating on the Budget Subcommittee, along with Dr. Gates.

• Mr. Geoffrion noted that the subcommittee will have formal requests and recommendation available at the April 2021 BOH meeting, which will be well timed to get those recommendations into consideration for the FY22 budget cycle.

• Mr. Geoffrion advised the board that there appears to be a one-time infusion of some considerable amount of money from federal sources, and he feels this is a major resource that’s going to be important going forward. He noted that health equity, improving technology and salaries for critical employees are all on the horizon, and he asked for board feedback now to assist the subcommittee in defining recommendations.

• Dr. Gates provided a preliminary overview of the health fund budget for FY22. Prior to beginning his presentation, Dr. Gates provided clarification on three terms used fairly frequently: budget, expenditure authority, and revenue.

• Dr. Gates also noted that the Health department expends from two different funds - the Health Fund, which is a specific, special revenue fund, not directly part of the General Fund; and the Grant Fund. The Health department is close to 50-50 funded between the Health Fund and the Grant Fund.

• Dr. Gates reviewed the timeline for the FY22 budget process. In October 2020 we began the process, so basically 3 months into the current fiscal year, we start planning for the next fiscal year’s budget. By December, data entry and initial compilation is to be complete, and in January that information is presented to County Administration for an initial review. In March there’s a more detailed review, and then in May, the BOS hosts their budget hearings. Dr. Gates recommended that the Board, if it’s allowed, consider starting the Budget Subcommittee earlier in the cycle, in future years.

• Dr. Gates presented on the high level budget for FY21 and FY22:
  - The personnel budget was $11 mil for the current year; that is increasing to $13.2 mil for next year, an increase of approximately 20%. The increase in personnel is actually a representation of how the County will be charging certain staff to the department related to a few new position control numbers (PCN’s), as well as 55 temporary employees that the Health department brought on to work the COVID-19 pandemic response. It also represents a shift in the amounts of wages, salaries and benefits expected to be transferred into the Health department from other departments or other staff, and does not represent $2.1 mil in complete new staff, or raises.
Supplies and services is going from about $5.5 mil to almost $5.9 mil, an 8% increase; so a net 15% increase, moving from $16.5 mil to $19 mil. Supplies and services is simply an increase in our expected supply and services expenditures.

Dr. Gates next presented the revenue budget information. Revenues are scheduled to decrease from FY21, going from about $4.7 mil to about $4.3 mil. These are direct revenues, our receipts from Health department activities. That is a 9% reduction. That is primarily related to the roll-back of the Consumer Health and Food Safety license fee increase, which was scheduled to increase in January this year, and then was rolled back to maintain as much economic power for our small businesses and restaurants as possible.

Dr. Gates next reviewed the General Fund Subsidy, which shows about $7.6 mil in FY21 but is flat for FY22 - a zero-percent increase, but it is important to note that historically we’ve been closer to the $10.5 to $11 mil mark for the General Fund Subsidy. This was the result of the contraction of expenditures early on in the COVID response, where the County Administration directed the departments to surrender a fixed percentage of their personnel budget and a number of PCN’s. The Health department negotiated and instead of losing those PCN’s, offset and reduced the General Fund Subsidy by the amount that those PCN’s represent.

Dr. Gates noted that the net budget for FY21/22 is projecting a $9.5 mil deficit. Our revenues will be almost $12 mil, our expenditures are projected at $19 mil, which is a $7 mil deficit. We are also responsible for transferring funds out, primarily as matching funds on grants, to the tune of $2.3 mil, which will bring our net FY 21/21 to a $9.5 mil deficit. This will exhaust the Health Fund balance, and may push beyond the existing Health Fund balance.

Supervisor Heinz inquired about getting the General Fund Subsidy back up to $10.9 mil, and possibly several times that amount, based on the need for public health services going forward.

Dr. Gates thanked Supervisor Heinz for his support, and advised that there is always an opportunity for expansion, and the Health department does anticipate requesting additional support.

Dr. Gates mentioned that there’s a significant amount of grant funding on the horizon, and that the Health department also advocates strongly for additional Health Fund support, which is not subject to the whims of funders and outside agencies.

Mr. Humphrey inquired if the enhanced marijuana revenues will be distributed to local health departments. Dr. Gates said that he is not aware of any earmarks for direct flow of those revenues to the Health department.

Dr. Gates provided the board members a handout on the impact of the approximately 3-month immunization fee waiver that Dr. Cullen and the vaccine staff initiated in late September/early October 2020, to encourage residents to get their non-COVID vaccinations. The normal procedures for insured, Vaccine for Children (VFC), or Vaccine for Adults (VFA) eligible clients were all in place, and all vaccine and administration fees were to be waived for any uninsured or underinsured for the 3-months of this trial.

Dr. Gates noted that under the fee waiver program, 610 vaccinations were provided, and 563 patients had fees adjusted, with a total of $28,000 in adjustments made. Of that $28,000, only $9000 was potential revenue that the Health department would have lost, due to two special Pima County Health Department events: a special mobile school outreach program done in October and November, and a flu outreach program that saw significantly more doses of the flu vaccine given than in the year before.

Mr. Humphrey inquired if the Health department has discussed what would happen if vaccinations were provided at no charge, if that would significantly increase the number of people who were vaccinated. Dr. Gates noted that it was part of the hope in the initiation of the fee waiver program, but that our ordinance specifically prohibits us from doing that in
situations outside of the public health emergency. So in order for the Health department to provide vaccinations at no charge, a change in the County ordinance would be required.

- Dr. Gates advised that the ordinance in question, Pima County Ordinance 8.12.030, effectively states that the County will charge patients the actual cost of the vaccine plus an initial administration fee of $15.00, or $10.00 for each subsequent vaccine given after the first. The key element that needs to be addressed is sub point A, “no person shall receive any immunization agent at the Health Department without paying the required fee except in the event of public health emergency. The Director may waive the required fee in the interest of community welfare, or when children are receiving immunizations in accordance with ARS 36-673 and ARS 36-692.” Dr. Gates noted that modifying this point would provide the Director or other Pima County authorities greater latitude in that way.

- Mr. Humphrey stated that, in his opinion, health equity is a public health crisis, so isn’t it time to review these policies?

- Dr. Gates turned that question over to Ms. Crystal Rambaud, the Vaccine Preventable Disease Program Manager.

- Ms. Rambaud indicated there is an opportunity with reducing the fees or eliminating the fees for eligible VFA clients. The VFA program has a relatively small grant and vaccine inventory typically runs out after only a few months, with our only option then being to use purchased vaccines and charge clients. The fee waiver program would be very helpful in being able to give these clients the VFA vaccines that we have available, give them the purchased items that they need, and then they don’t have to be charged. So they’re still able to get the services that they need for no cost without having to either send them somewhere else, or the client having to skip vaccines, or making them pay.

- Dr. Horowitz inquired if amending the ordinance would provide more flexibility to serve people? Ms. Rambaud stated that yes, in her opinion, we would be able to provide people purchased vaccine without having to charge them.

- Mr. Humphrey suggested that the BOH direct Health department staff to look at all current policies, then come back and make recommendations on how any of these policies can be tweaked to allow us to better serve our underserved populations.

- Dr. Cullen agreed, and advised that she would have our lawyers review Pima County Ordinance 8.12.030.

9. ETHICS COMMITTEE UPDATE – STANDING ITEM

- Jennie Mullens, Administrative Support Services Manager in the Office of the Director, provided key updates from the Ethics Committee at the request of Dr. Cullen.
  - 2 members have been added to the Ethics Committee:
    - Mr. Bill Ward, representing Pima Community College;
    - A representative from the Tucson Pima Collaboration to End Homelessness. This was a formal request from that group to ensure that there was representation from advocates of the homeless community serving on the Ethics Committee.
  - A memo was shared that was recently issued by the County Administrator, Mr. Huckelberry, that:
    - describes the purpose and function of the Ethics Committee;
    - gives a history and background to it;
    - outlines the current membership;
    - makes it clear to the Ethics Committee that the main role of the Ethics Committee is to provide advice to the Director of the Health department that will be considered for recommendations made, and that the ultimate decision rests with the Director.
Had a discussion over what the implications are of having moved to the hybrid COVID-19 vaccination model, that has been adopted, which is aged-based and front the essential workers in the State, and what the implications are in the County for what that means for people of any age with high risk medical conditions, and disabilities, and other vulnerable that might have had their vaccination pushed further down or delayed. Some possible changes to the 1B and 1C guidance were proposed.

- Shared the final guidance around the change to 1A.3, which actually expanded people with disabilities and high risk medical conditions who receive long-term care services in the home, and actually expanded to people with any disability according to the American Disabilities Act, even before other parts of the State had elevated people with disabilities.

- Shared a letter from the Tucson Pima Collaboration to End Homelessness that advocated for elevating people who were experiencing homelessness. The updated guidance elevates people in both sheltered and non-sheltered settings, who will now be eligible under the 1C guidance that will be taking effect tomorrow.

- Shared a draft of the standard operating procedure that have been developed in the department to use to consider exceptions to the current vaccine eligibility criteria, based on people who have severe or life-threatening medical conditions, or extenuating circumstances that require us to elevate or bring forward their eligibility for vaccine. It is felt that some kind of process needed to be in place for determining exceptions based on compassionate grounds.

10. DECLARING RACIAL & ETHNIC INEQUITIES & INCOME INEQUALITY IN PIMA COUNTY TO BE A PUBLIC HEALTH CRISIS – STANDING ITEM
   - Dr. Cullen advised there is no specific update other than the grant application specific for equity and how to improve diversity.

11. SUMMATION OF ACTION ITEMS & PROPOSAL OF FUTURE ITEMS
   - Dr. Horwitz reminded the board that if there are any important old issues that come up that haven’t been resolved, it’s a collective responsibility amongst 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.

12. ADJOURNMENT
    The motion was made and seconded (Mr. Rojas/Dr. Kohler) that the March 24, 2021 meeting adjourn. Motion carried unanimously.

    The meeting adjourned at 5:09 PM.

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