

Pima County Board of Health Minutes  
September 15, 2021  
**Teleconference / MS Teams Meeting**  
Abrams Building, Room 2359  
3950 S. Country Club Road  
Tucson, Arizona 85714

**1. CALL TO ORDER**

Dr. Horwitz called meeting to order at 3:03 P.M.

ATTENDANCE:

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

**A quorum was established (6)**

Non-Board Members

Dr. Theresa Cullen, Pima County Health, Director  
Ms. Paula Mandel, Pima County Health, Deputy Director  
Mr. Vic Pereira, Pima County Health, Deputy Director

Presenters

Ms. Amanda Monroy, Pima County Health Department, Health Policy Manager  
Ms. Ursula Nelson, Pima County Department of Environmental Quality, Director  
Ms. Marie Light, Pima County Department of Environmental Quality, Hydrologist  
Mr. Mark Persons, Pima County Health Department, Program Manager

**2. PLEDGE OF ALLEGIANCE**

Due to Teleconference Meeting the Pledge of Allegiance was not conducted.

**3. MINUTES ADOPTION**

- Adopted Board of Health August 13, 2021 Emergency Meeting Minutes.  
The motion was made and seconded (Mr. Rojas/Dr. Smith) that the August 13, 2021, Board of Health Emergency Meeting Minutes be adopted. The motion passed unanimously.
- Adopted Board of Health August 18, 2021 Meeting Minutes.  
The motion was made and seconded (Mr. Geoffrion/Dr. Smith) that the August 18, 2021, Board of Health Meeting Minutes be adopted. The motion passed unanimously.

**4. CALL TO AUDIENCE**

- Dr. Mark Sneller, who holds a PhD in microbiology and biochemistry with a specialization in macro mycology, spoke on agenda item 6, Update Regarding the Mulberry/Olive Tree Ban in Pima County. Dr. Sneller is one of the authors of two articles presented to the BOH members, one titled "Pollen changes during five decades of urbanization in Tucson, Arizona," and the other titled "Frequency of Airborne Alternaria Spores in Tucson, Arizona over a 20-year period," which discuss desert landscaping and inner city development using imported and native plants, and the institution of pollen control laws to address the severity of the pollen problem caused by these plants. Dr. Sneller noted that Tucson led the nation in

pollen control since 1932, and established the first pollen control ordinance in the country in 1984 that included a ban on the sale and/or planting of mulberry and/or olive trees in Pima County. Dr. Sneller noted that Pima County lost the ability to track pollen in 2000 due to a decrease in funding by the Board of Supervisors. It is currently not possible to correlate any medical conditions to pollen due to the lack of tracking data since 2000. Dr. Sneller has asked the medical community to help continue this investigation, and applauds the opportunity to revisit this issue.

## **5. DIRECTOR'S UPDATE**

- Ms. Paula Mandel presented the Director's update in Dr. Cullen's absence.
- Ms. Mandel reported on some Pima County Health Department (PCHD) staff accolades
  - five members of the Consumer Health and Food Safety (CHFS) Division received certificates of achievement for completion of the Full Assessment of All Nine Standards of the FDA Voluntary National Retail Food Regulatory Program;
  - Ms. Kat Davis, Pima County Health Department manager for the Health Equity for Intersectional Population program, was recognized as a member of the 40 Under 40 in Public Health by the de Beaumont Foundations.
  - Mr. Spencer Graves has been elected as the president of the Arizona Local Public Health Emergency Response Association (ALPHERA). ALPHERA is a group that reports to ADHS and consists of the 15 county PHEP coordinators and the tribal PHEP coordinators.
- COVID Update:
  - Pima County is at a high level of transmission, and cases remain in the red range with over 130,000 cases since the onset. The epidemiology curve from March 2020 to present indicates experiencing cases at almost the same rate as last year.
  - Cases are currently down, with 150 cases per 100,000.
  - Positivity rate continues to run about 8-10%, and all COVID cases are the Delta variant.
  - 64% of the eligible Pima County population is vaccinated, with 53% of Pima County being fully vaccinated at this time. Nearly 1 million doses of COVID vaccine have been administered by Pima County and our community partners.
  - There have been over 2500 deaths in Pima County.
  - Increasing antigen testing, and working to push antigen tests out to school locations.
  - Hospital admissions are down slightly, but hospitals remained stretched to their limits on both bed capacity and workforce shortages.
  - Continue to push events high census tract areas by providing vaccine clinics and testing sites, and working with Communications on building communications pieces.
  - CDC recommended a third dose, or booster dose, for immunocompromised individuals.
  - Still waiting for ACIP and CDC to make recommendations on third doses for the rest of the general population.
  - Still waiting for ACIP and CDC to make vaccine recommendations on children under the age of 12, and hope to have that information in the next month.
  - PCHD continues to work closely with each of our school districts.
  - There have been 1900 cases in schools, about 60 total outbreaks across all of the school districts, and several classroom closures. An outbreak is determined by the number of positive cases and the total number of students in a classroom, and depending on circumstances, can include the total number of students in a grade; 4 positive cases in a classroom of 30 students is considered 10% of the total, and constitutes an outbreak.
  - In the instance of positive cases, the epidemiology team works with the school to identify the close contacts within the room, determine the needs for testing,

quarantine and isolation, and return to the classroom. Schools with mask mandates are doing much better on outbreaks than those who do not have mask mandates.

- PCHD is providing BinaxNOW self-test kits to all the school systems at this time for them to hand out to families who may be having difficulty getting in for testing. PCHD Care Coordination team also works to provide assistance with masking, cleaning and sanitizing supplies, and even food service for families in need.
- Ms. Amanda Monroy presented the “Pima County Public Health Draft Roadmap to Recovery: building resilience beyond COVID-19,” that calls for PCHD to ensure an equitable recovery from the pandemic in response to Resolution 2020-92. The equity model focuses on teaching, building, financing and sharing in order to heal. The essentials of recovery include community partnership, innovative models of public health service, health equity, and communication and transparency. The guiding principles include being goal oriented and outcome focused; to encourage community collaboration; to support a culture of quality; to be people-centric, equitable, accessible, accountable, and data driven.

#### **6. UPDATE REGARDING THE MULBERRY/OLIVE TREE BAN IN PIMA COUNTY**

- Ms. Ursula Nelson from the Pima County Department of Environmental Quality (PDEQ) provided the board members with information on Pima County Ordinance 1991-137, Chapter 7.41 – Pollen Control, Section 7.41.030 – Mulberry and Olive Tree Control, which prohibits the sale or planting of mulberry and/or olive trees in Pima County. This ordinance did not affect established mulberry and/or olive trees that were planted prior to the ordinance taking effect, so the removal of existing trees was not required.
- Ms. Nelson advised that several organizations have requested that this prohibition be removed, and after a review of the available information, PEDQ cannot provide a conclusive recommendation due to the existing data gaps.
- Ms. Nelson discussed the benefits and concerns surrounding the request. Benefits include harvesting olives for use in commercial venues and ventures - PDEQ is aware of the historic and cultural significance of this request; and planting more trees is always something PDEQ wants to see, given how hot the community is, to provide additional urban wildlife habitats, and to help with food. The primary concern is the impact on public health and wellness due to allergy issues and respiratory problems, but there is no definitive data that indicates the exact impact on the community as a whole. An additional concern is increased water usage; these plants are not a native species to this area, and while they do well without water, they would need water to thrive and produce.
- Ms. Nelson noted that it would require all the data to make an informed decision to ensure actions are taken that will be protective of the public health and the environment. She indicated that next steps need to include a comprehensive evaluation of available data to identify the gaps within the data and allow development of strategies to fill those data gaps, as well as conducting additional research to address any missing information.
- Mr. Geoffrion mentioned that Tres English, the director of Sustainable Tucson, supports getting more data on this matter. Mr. Geoffrion also noted that this issue needs to be studied in more depth before the BOH makes any recommendation.

#### **7. PFAS UPDATE**

- Ms. Nelson noted the topic of PFAS (per- and polyfluoroalkyl substances) is rapidly developing and something that PDEQ is concerned about because this compound is not currently regulated by PDEQ. PFAS are used to make fluoropolymer coatings and products that resist heat, oil, stains, grease, and water, do not break down in the environment, can move through soils and contaminate drinking water sources, and bio accumulate in fish and wildlife.
- Ms. Nelson introduced Ms. Marie Light, a PDEQ hydrologist who is presenting information on national and local strategies to minimize the impact of PFAS.

- Ms. Light provided historical data on PFAS:
  - PFAS manufacturing began in the 1940's.
  - Studies were conducted in the 1970's that detected PFAS in workers' blood serum.
  - EPA decided in 2000 that alternatives to PFAS were needed.
  - In 2010, manufacturers voluntarily began phasing PFAS out of their products.
  - The process of not using PFAS at all began in 2020, but there is still stock found in some materials used to infuse in manufacturing processes, and in AFFF (Aqueous film forming foam), which is a highly effective foam used for fighting high-hazard flammable liquid fires such as gasoline, oil and jet fuel. AFFF has been the national standard in all firefighting equipment because there is no substitute that works as effectively. There is still research being done to come up with better alternatives.
- PFAS is found nationwide at airports and industrial facilities, waste water streams and monitor wells. The use of AFFF in Pima County has caused concerns that the source of high concentrations of PFAS in private wells located northwest of the Tucson International Airport (TIA) is caused by the groundwater runoff from use of AFFF by TIA and the Air National Guard (ANG). The ANG is doing an inventory of their use of AFFF and taking some very specific actions to address the issue, such as determining ways to continue to use the AFFF and provide containment so that it does not run off the area where it has been applied. The State of Arizona is also involved in this process as this is not an issue that is exclusive to Pima County.
- The primary avenue of exposure is food ingestion from food packaging (72%), water consumption (22%), and dust ingestion (6%). Twelve parts of the human body are affected by PFAS.
- PFAS is a known carcinogen and as of June 2020 is now listed as a toxic chemical.
- In 2016, the EPA set a health-based guidance level for PFAS at 70 ng/L. In 2018, Tucson Water sets an operation PFAS target at 18 ng/L.
- Although there are no drinking water standards for PFAS, Arizona has put policies in place such as the registering of all wells drilled in the state with ADWR (Arizona Department of Water Resources); health consultations and analytical lab testing by ADHS; and regular inspection of the public water system by ADEQ.
- Effluent guidelines were proposed in March 2021.
- In April 2021, Governor Doug Ducey requested that the DOD take a higher profile in activities such as full data sharing, and develop a conceptual model for identifying sources, determining movement and effective remediation methods, as well as design and install early response action to protect public drinking water systems.
- In June 2021, requirements were established for 29 PFAS compounds that need to be analyzed so all water utilities are going to be monitoring these compounds in the next 5 years.
- There was an unexpected TARP temporary shutdown in June 2021 due to increased levels of PFAS in nearby groundwater. There was concern over losing control of water treatment, but as of September 2021 there is a new permit to discharge the treated water into the Santa Cruz River just north of Irvington Road and West of Interstate 10. The draft permit plan is that the treated water will be directed to the reclaim system if it can still be used; if it cannot be used, the alternative plan is to discharge it to the Santa Cruz River. The permit request is for 2.2 million gallons per day with the treatment standard set to the equivalent level of Tucson Water's standard of 18 ng/L.
- Ms. Light indicated that moving forward Pima County will be monitoring PFAS concentrations, and insuring that new validated methods are being employed by laboratories. Future expectations are that more monitoring locations and more chemicals will be discovered in the groundwater. Pima County will continue employing a high level of collaboration among federal, state and local researchers to solve these problems, develop conceptual models, and test the different treatment methods.

## **8. OPIOID DRAFT ACTION PLAN**

- Mr. Mark Person updated the BOH on drug overdose rates, as well as the PCHD response plan. Overdose death data is collected from death certificates and auto pay data, and the data is updated monthly.
- There have been notable changes among the contributors in drug overdose deaths from 2017 to 2021:
  - 2017: Amphetamines and heroin are the top 2 contributors to drug overdose deaths.
  - 2018: Amphetamines and heroin remain the top 2 contributors, but fentanyl use starts to surge in the community.
  - 2019: The rate of fentanyl use changes significantly and surpasses heroin to become only 2nd to methamphetamines.
  - 2020: Fentanyl becomes the number one contributor in overdose deaths within 12 months.
  - 2021: Fentanyl remains at the top of the overdose death list. The average number per month is extremely high. Heroin overdose death has reduced mostly due to the preference for fentanyl.
- Had annual record-breaking highs for overdose deaths in 2019 and 2020 because of the presence of fentanyl, and there is no doubt that the rate of overdose deaths in 2021 will set a third consecutive record breaking high. The data presented for 2021 is for
- The age groups most impacted by the rise in fentanyl use are young people. Fentanyl by itself is the leading cause of death for minors under the age of 18, and teens aged 13-19; which is above deaths caused by car accidents, firearms, and any natural causes mainly due to the widespread presence of the drug, and how lethal it is. In 2021 there have been 19 overdose deaths in the age groups 0-5, 6-12, and 13-19, and with the exception of one death, all are due to fentanyl.
- Dr. Kohler inquired if the overdose deaths are due to the user directly taking fentanyl, or is it a contaminant? Mr. Person advised that in the case of infants and toddlers, this is an accidental ingestion due to someone in their environment having the drug and the infant/toddler gaining access to it. There is a combination involved with people who used the drug recreationally, or have an opioid addiction. Some people know exactly what they are taking and die because of it, and some do not know that the drug they took contained fentanyl. Mr. Person indicated that it would be impossible to measure that due to the mix of possible factors.
- Fentanyl is extremely addictive, readily available, relatively cheap, easily concealed, and doesn't require a needle to administer but can be injected, smoked or snorted.
- Mr. Person indicated that the vast majority of fentanyl is in the form of a little blue pill that looks like a M30 oxycodone pill, or can even resemble other pharmaceutical medications. These pills are made from non-pharmaceutical, illicit fentanyl, and each pill has enough toxicity to kill multiple adults because it is impossible to know where the drug is dispersed physically in the pill. Narcan is effective, but fentanyl is extremely fast acting and can kill someone in as little as 15-20 minutes, a lot quicker than some of the pharmaceutical grade opioids, so cases are often not caught in time to administer Narcan.
- Mr. Person advised that PCHD is constantly sending out health advisories on fentanyl, is doing interviews with the media, have printed flyers and developed presentations that will be used to target schools and young people to make them aware of the dangers. The hope is to get the messaging in front of the target population so that they are aware of how lethal fentanyl is.
- Dr. Cullen challenged the BOH to help PCHD brainstorm, think "outside the box," on what the public health arena might do to better address the fentanyl situation. She asked Dr. Horwitz to consider setting aside a BOH meeting or small group to do this.

**9. ETHICS COMMITTEE UPDATE – STANDING ITEM**

- No report.

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

- No report.

**11. SUMMATION OF ACTION ITEMS & PROPOSAL OF FUTURE AGENDA ITEMS**

- Dr. Horwitz reminded the board members to send him an email and ask to have the item put on the agenda.

**12. ADJOURNMENT**

The motion was made and seconded (Dr. Kohler/Ms. Trowbridge) that the September 15, 2021 meeting adjourn. Motion carried unanimously.

The meeting adjourned at 5:21 P.M.

The next meeting is scheduled for October 20, 2021, at 3:00 P.M.