

**1. CALL TO ORDER**

Dr. Horwitz called meeting to order at 3:00 P.M.

**ATTENDANCE:**

Mr. Bin An - Absent  
Supervisor Matt Heinz - Absent  
Mr. Rene Gastelum - Absent  
Mr. Charles Geoffrion, Vice President  
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 (7)**

**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, Health Policy Manager  
Ms. Jennie Mullins, Pima County Health, Administrative Support Services Manager  
Mr. Mark Persons, Pima County Health, Program Manager

**2. PLEDGE OF ALLEGIANCE**

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

**3. MINUTES ADOPTION**

- Adopted Board of Health October 20, 2021 Meeting Minutes.
- A correction request was made by Mr. David Higuera on the Call to Action report that he had provided at the October 20 Board of Health meeting. Mr. Higuera requested the correction on page 2 of 8, where the bullet stating "*Mr. Higuera explained that the Options 3, 4, and 5 had previously been adopted by the Board of Supervisors, with the employee vaccination incentives plan put into effect at the August 16, 2021 meeting and the disincentives plan being adopted at the September 7, 2021 meeting.*" should be corrected to read "*Mr. Higuera explained that the Options 3 had previously been adopted by the Board of Supervisors, with the employee vaccination incentives plan put into effect at the August 16, 2021 meeting and the disincentives plan being adopted at the September 7, 2021 meeting.*"

The motion was made and seconded (Mr. Geoffrion/Dr. Smith) that the October 20, 2021, Board of Health Meeting Minutes be adopted with this correction. The motion passed unanimously.

**4. CALL TO AUDIENCE**

- No Call to Audience.

**5. DIRECTOR'S UPDATE**

- Dr. Cullen provided a COVID-19 update:
  - CASES: Pima County remains in a very high transmission phase of 350 cases/100K, which is higher than cases were in summer 2020. About 20-25% of cases can be school-based, depending on the day, and October data indicated that 26% of the positive COVID-19 cases were in vaccinated people.
  - VACCINATION STATUS: Pima County has given 1.4 million shots
    - 65% of Pima County is fully vaccinated;
    - 70% of 12 year olds are fully vaccinated;
    - 89% of those 65 years old and older are fully vaccinated.
  - TESTING: Pima County Health Department (PCHD) laboratory partners report that the Pima County positivity rate is significantly elevated between 12-14%.
    - Had approximately 31,000 tests last week, of which approximately 12% were positive. The national standard is 1.5 tests per 1,000 people per day, so 1,500 tests per day is adequate testing, and Pima County does more than 1,500 per day.
    - Pima County has given approximately 45,000 BinaxNOW home test kits out. An additional order for approximately 80,000 home test kits has been placed and confirmed with the State.
    - The vast majority of the home test kits have gone through the K-12 schools.
    - The Pima County Public Library was provided 20,000 home test kits for distribution at various locations beginning Monday, November 15, 2021.
    - We also worked closely with the Community Advisory Committee to make sure that community-based organizations such as the Tribes, first responders, behavioral health and some faith-based organizations who want BinaxNOW kits are able to get them.
    - Demographic data is being collected on who is getting the BinaxNOW home test kits at PCHD facilities to meet the requirements of the testing equity grant used to provide them. The test kit has a QR code that directs users to instructional videos, as well as enabling self-reporting of test results.
  - PUBLIC HEALTH ADVISORY (PHA): PCHD sent out a PHA indicating that COVID-19 boosters would be immediately available for anyone 18 years and older at our facilities. The individual must meet the established criteria after initial vaccination: at least six months after having the full series of Pfizer or Moderna, and two months after the J&J vaccination. The goal is to stop the transmission of the disease, based on the high risk status in Pima County and the October data indicating that 26% of the positive COVID-19 cases were in vaccinated people. Additionally, the PHA encouraged people to vaccinate as COVID-19 remains primarily a disease of the unvaccinated.
  - HOSPITALIZATIONS:
    - Banner Hospitals has seen a significant increase in the number of people in the hospital in Maricopa County due to COVID-19, and also in the ICU with the use of ventilators.
    - Pima County has limited ICU bed availability; on average there have been 2-8 beds.
    - Bed surge capacity is once again fairly limited.
    - 46% of the ventilators in Pima County are in use by COVID-19 patients.
  - Dr. Cullen noted that cause of death determinations of COVID-19 are done at the State level, not at the County level. The State reviews all death certificates and determines whether to count the death as COVID-19 or not; the County can review these but cannot make a change.
  - SCHOOLS: Dr. Cullen discussed COVID-19 outbreaks in schools, and school closures.
    - As of this morning, there have been 176 outbreaks, with 106 classroom closures. PCHD works closely with the school, the principal and the superintendent in a district to come to a mutual agreement to initiate a closure based on: the number of cases in a school, and/or more than a 10% positivity rate in the classroom or school, as well

as the number of kids that are out, the classroom structure, and masking in the classroom; if there is consistent masking, the positivity rate may be increased to 15% before recommending closure.

- The goal is to keep classrooms open wherever possible. If a school or classroom is closed, the closure runs 10-14 days, and every effort is made by the school to accommodate distance learning during that time.
  - If a student is fully vaccinated and is a contact to a case, they do not need to quarantine; this is true regardless of age. It is always recommended that the individual test on day 5-7 post-contact.
  - The expectation is that if we can get to full vaccination for 5-11 year olds and get school-based and breakthrough cases better controlled, this will lead to a significant decrease in the case load.
- Dr. Cullen spoke about some of the recent positive public health efforts being made:
    - Dr. Cullen mentioned that due to a significant uptake in people coming to PCHD clinics for COVID-19 vaccinations, they are being educated about the other services that are available to them.
    - A syphilis health advisory was sent to the health advisory network about three weeks ago due to the increase in congenital syphilis that has been seen.
    - Looking at pre-exposure prophylaxis for HIV, called PrEP, with the hope to provide that very early next year.
    - Looking at offering Medication Assisted Treatment (M.A.T.) at our clinics during our needle exchange program for people using narcotics or opioids.
    - Dr. David Yost has joined the PCHD as the new Tuberculosis Officer, working quarter-time.

## **6. PIMA COUNTY SUICIDE AND OVERDOSE FATALITY REVIEW COMMITTEE RECOMMENDATIONS**

- Mr. Mark Person advised that the County organizes and facilitates a disciplinary review team to review individual overdose cases in great detail to determine what the major influential factors are leading up to a fatal overdose. The review team is funded by the State, falls under State statutes, and is comprised of a collection of experts who have some sort of interaction with people that experience overdoses, such as physicians, nurses, behavioral health staff, counselors, law enforcement, and the County Attorney's office.
- Mr. Person presented one of the recent recommendations that is focused on justice-involved populations, people who are in custody in any correctional facility. Many overdose decedents experience that fatal overdose in close proximity to being released from custody due to their tolerance to the drug depleting in the body during custody. Then the next time they use the drug, often at the same amount used prior to being arrested, there is a higher risk of experiencing an overdose. The reality, locally, is that many of these cases happen the day of release.
- The review team discovered several simple recommendations that could be put in place to mitigate the likelihood of a detainee experiencing a fatal overdose when they are released. These recommendations include:
  - Releasing people during normal business hours when they can often get access to the services and help they need;
  - Sending peer-support staff – people with lived experience that are recovering and understand addiction – to meet with people in custody, provide some medication, and help them with release plans so they know how to stay safe and get services once they are released.
- Mr. Person noted that there is a real need to establish a platform and standardized review process where the committee's reports could be presented to the Board of Health on a periodic basis for their feedback and guidance on next steps such as partnering with another

County entity or another agency, who needs to be involved, and what additional resources may be needed. The hope is that if a policy-level recommendation is decided during this review process, the Board of Health would proceed in making a recommendation to the Board of Supervisors.

- Dr. Horwitz agreed that this is an excellent suggestion to bring these reports before the Board of Health periodically, and advised Mr. Person to let the Board of Health Coordinator know when a presentation is prepared and it will be put on the agenda.

#### **7. COMMUNITY ADVISORY COMMITTEE UPDATE & ACCOMPLISHMENTS**

- Ms. Jennie Mullins presented the requested six month progress update for the Community Advisory Committee (CAC). A handout was sent to Board of Health Members for review.
- Ms. Mullins mentioned that the purpose of the CAC is to advise and guide response plans, build trust amongst organizations, advocate for greater access to many underserved communities, and get input to implement plans being developed.
- Ms. Mullins provided the accomplishments achieved by the CAC since their inception in April: holding multiple visioning sessions to identify community concerns, review strategies of operations in vulnerable communities, providing input into community health needs assessment, which is key to the PCHD reaccreditation process, discussion of a recovery and resiliency strategy going forward, distribution of six mini-grant awards to grow Community Champions, and continuing to expand membership to promote greater diversity.
- Ms. Mullins noted that the CAC is looking forward and planning for the future. There is discussion on how to formalize ways of working together with the PCHD, and various models of formal agreements between community advisory committees and local health departments around the country have been reviewed. Planning has begun in the hope that an in-person retreat can be convened to bring the CAC members together to develop a work plan for the years ahead.

#### **8. COVID-19 UPDATE – STANDING ITEM**

- Refer to the Director's Update.

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

- Ms. Jennie Mullins advised that the Ethics Committee had a training session on Public Health Ethical Decision-making Framework. The training session was provided by two of the national champions of public health ethics in the country: Dr. Alan Melnick, Clark County, WA Health Officer, and Mr. Matthew Stefanak, a former member of the Board of Health in Mahoning County, OH. Dr. Melnick and Mr. Stefanak were part of developing the Public Health Code of Ethics.
- Ms. Mullins noted that the ethical decision-making training the Ethics Committee received was recently applied on November 10 to a real-world ethical challenge the PCHD is looking at involving providing long-acting, reversible contraceptives through the mobile clinics that PCHD provides in school-based settings. The group reached a consensus to recommend to the Director, reinstating LARC in PCHD mobile clinic settings. Additional work is needed for the department to develop a comprehensive plan to ensure all stakeholder needs are met. Updates will be provided to the Board of Health.

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

- Ms. Amanda Monroy advised that the new Equity Manager, Mr. Andrés Portela, has joined the PCHD. Both Mr. Portela and Ms. Monroy will be providing updates for their respective areas to the Board of Health in the future.

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

- Dr. Horwitz asked that people in charge of standing items on the agenda let the Board of Health Coordinator know if they have an update or not. If there is not an update, that time can be freed up to address other matters.
- Dr. Horwitz reminded the Board of Health Members to send him an email to request items be added to the agenda.

**12. ADJOURNMENT**

The motion was made and seconded (Mr. Rojas/Dr. Kohler) that the November 17, 2021 meeting adjourn. Motion carried unanimously.

The meeting adjourned at 4:49 P.M.

The next meeting is scheduled for December 15, 2021, at 3:00 P.M.