

Approved
October 26, 2016

1. CALL TO ORDER:

Dr. Horwitz called the meeting to order at 3:05 pm.

Attendance was as follows:

Mr. An - Absent
Mr. Elías - Absent
Mr. Emich
Mr. Gastelum - Absent
Mr. Geoffrion
Ms. Gonzales
Dr. Horwitz
Mr. Humphrey
Mr. Rojas
Dr. Smith
Ms. Trowbridge - Absent

A quorum was established.

2. PLEDGE OF ALLEGIANCE

Mr. Humphrey led the Board in the Pledge of Allegiance.

3. MINUTES ADOPTION

- Adopt Board of Health July 27, 2016 Minutes

The motion was made and seconded (Mr. Rojas /Dr. Horwitz) that the July 27, 2016 Minutes be adopted as written. Motion carried 7-0.

4. COMMUNICABLE DISEASE UPDATE

Dr. Paul Horwitz, Board of Health President introduced Dr. Carlos Perez-Velez, Health Department Deputy Chief Medical Officer. Dr. Perez-Velez wanted to inform the Board on the status of the Mosquito Surveillance Program and on Vector Borne Illnesses. The Mosquito Surveillance Program has issued 1,204 traps which is double the amount that was done the previous year and about 25% of them were identified as the Aedes Aegypti mosquitos that are known to spread Dengue, Chikungunya and Zika virus. Dr. Perez-Velez stated in 2015 there were 33% of Aedes Aegypti mosquitos found which is an 8% decrease from the previous year, which was due to the increase of public awareness by educating the public on mosquito prevention. Also the Culex mosquito which is known to spread West Nile virus was found in 263 traps which accounts for about 18% of the trapped mosquitos and only 2 of them were tested positive with the West Nile virus. The last positive West Nile test was in 2014.

Dr. Perez-Velez stated there has been 93 cases tested for Zika virus done in Pima County with 100% of them being travel related cases and of those cases only 7 cases have been confirmed with Zika virus. Six total were Pima County residents: 1 case was a traveler passing through Pima County on their way to Oregon; 1 of these cases is a pending case; and 4 are considered federal cases from a detention center. Dr. Perez-Velez said regarding the West Nile virus there has been one clinical case that was probable and 2 confirmed cases but did not have any symptoms. Also there has been 2 Dengue cases reported with 1 case who visited Mexico and 1 from El Salvador. Dr. Perez-Velez also wanted to briefly state that

they are in connection with the Mexican government in regards to the epidemiology surveillance system and have learned they have now reported 4 Zika virus cases in a town in San Miguel, Mexico.

5. NATIONAL PUBLIC HEALTH DEPARTMENT ACCREDITATION UPDATE

Dr. Paul Horwitz, Board of Health President informed the Board members that Alan Bergen, Program Manager Senior would be sitting in place of Dr. Francisco García, Health Department Director at this meeting. Alan Bergen also presented on the National Public Health Department Accreditation Update. Mr. Bergen provided the Board with an article from the (CDC) Centers for Disease Control and Prevention that released results on the first evaluation that was on Public Health Accreditation. Mr. Bergen wanted to update the Board on the current status of the Public Health Accreditation Program as of May 2016. There is approximately 2,500 governmental Health Departments in the U.S and of the that number 134 Health Departments have achieved a 5-year accreditation, 176 Health Departments are currently in the formal process of pursuing accreditation, 42 states and the District of Columbia have at least one accredited Health Department and approximately half of the U.S. population or nearly 167 million people are covered by an accredited health department. There is currently 4 Health Departments within Arizona that are accredited. In addition, Florida is a centralized state in which the employees of all 67 local Health Departments are employees of the state, achieved accreditation for the entire integrated Local Public Health Department system in the state.

Mr. Bergen stated that the Public Health Accreditation Board (PHAB) contracted with NORC at the University of Chicago to conduct evaluations to identify opportunities to improve the accreditation process and to understand the impact of accreditation that was conducted from October 2013 through January 2016. The evaluation design was done through 52 surveys from Health Departments that had been accredited for 1 year, 18 Health Department personnel and stakeholders were interviewed and 3 focus groups were held by personnel and stakeholders. The survey findings helped the Health Departments stimulated quality and performance improvement opportunities, better identify strengths and weaknesses, document the capacity to deliver the Ten Essential Public Health Services, stimulated greater accountability and transparency, improve the management processes used by the leadership team and to the quality improvement processes derived from decisions made and create a strong culture of quality. The focus group and interview findings improved visibility, credibility, and reputation among community partners, board of health, and public health peers. Improved identification and use of evidence-based programs and metrics, increased cross-department collaboration and increased opportunity to evolve from periodically using quality improvement to viewing improvement and data-driven performance management as part of standard operations. The Public Health implication from accreditation has the potential to strengthen cross-cutting capacities and infrastructure, foster engagement in quality improvement, improve ability to identify organizational weaknesses, strengthen management processes, improve accountability.

6. EVERY STUDENT SUCCEEDS ACT; GETTING HEALTH BACK INTO SCHOOLS

Dr. Paul Horwitz, Board of Health President, introduced Brian Eller, Program Coordinator, who informed the Board of the new Every Student Succeeds Act (ESSA) legislation. The United States Congress passed (ESSA) in December 2015, reauthorizing the Elementary and Secondary Education Act (ESEA) of 1965. President Obama signed the bill into law on December 10 which replaces No Child Left Behind as the legislation that guides the Department of Education will provide states with more local control over federal funding. Health and Physical Education can now be funded with federal funds according to ESSA, putting them on a level playing field with other “Well-Rounded Education” academic subjects. This funding will only be provided if the State Department of Education and Local School Districts decide it is appropriate. Mr. Eller stated that the (ADE) Arizona Department of Education is working to create a state plan under ESSA that will represent Arizona stakeholders’

feedback and will serve the best interests of Arizona students by providing them with the quality education they deserve. The Arizona Department of Education's, "AZ Kids Can't Wait!" is the detailed blueprint for how ESSA will roll out in our state. There are several detailed actions that are critical for the Health Department to provide feedback on.

Mr. Eller has asked the Board to submit formal comments and recommendations on the Arizona State draft of ESSA. Mr. Eller would like to submit a proposal to add the following; 1) Standards based Health Education at K-12 levels of instruction, 2) Use of standards-based Physical Education to support Comprehensive School Physical Activity Programming, 3) School/Community partnerships that keep the whole child in mind, and 4) comply with federal regulations to develop and implement a strong local wellness policy. Mr. Eller would also encourage the Board to propose to ADE to allow students time to eat nutritious meals at school, increase the number of minutes students receive for daily recess, increase access to fresh and healthy food for use in schools and implement a comprehensive school physical activity program. The Board was honored to have an opportunity as a public stakeholder in Health to provide feedback.

The motion was made and seconded (Dr. Horwitz / Mr. Geoffrion) that the Board will approve Mr. Eller's letter with a few added changes and to also copy Governor Douglas Ducey and Senator Sylvia Allen, Chairwoman, Senate Education Committee. The motion carried unanimously 7-0.

7. NEEDLE EXCHANGE UPDATE

Dr. Paul Horwitz, Board of Health President introduced Miguel Soto, HIV Program Coordinator to the Board. Mr. Soto briefly addressed Pima County's history on drug use and informed the Board that Arizona is ranked 6th highest in the nation for individuals misusing prescription medication and Pima County has over 300 drug overdoses per year. In early 1996 the City of South Tucson approached the local police and the Health Department about the increase of syringes in public areas. After a series of meetings, the Health Department suggested a syringe exchange program. In conjunction with the City of South Tucson Police Department, the Life Point Exchange program began operation in the fall of 1996. Preliminary funding was provided by a private organization. Life Point began with mobile services being offered at two sites, one at 22nd and I-10 and the other at Speedway and Main Street. Each location was chosen due to the high incidents of drug use. In 2010 the program was moved indoors to the Pima County Health Department's Theresa Lee Clinic just east of downtown. The Theresa Lee Clinic offered direct access to HIV/STD services, education & testing rooms and wound care services.

Mr. Soto stated in June 2015 the Theresa Lee Clinic relocated and so the Needle Exchange Program returned to their mobile services due to the new Theresa Lee Clinic location being too far from where their clients are. The Needle Exchange program is a syringe exchange programs that is the most cost effective way of preventing new HIV, HEP C infections, abscesses & skin infections. Mr. Soto stated studies have shown that this program does not increase drug use but keeps the individuals clean, safe and keeps them out of the hospital. Life Point is currently paying .12 cents per syringe and operating on a budget of \$25-30,000 a year. Life Point offers both rapid HIV and rapid Hep C testing on the mobile unit and preliminary HIV positive results have blood drawn at the site by the Health Department for confirmation testing. The cost of treatment for Hepatitis C and HIV lifetime costs can be very expensive so keeping drug users clean and safe of these diseases can be a huge cost effective way to help the community. Mr. Soto has some challenges with testing due to not being able to hold clients after a rapid test and follow up is hard because clients leave and most likely do not return for results. The kits that are provided to the clients include syringes, cookers, cotton, alcohol wipes, tourniquets, distilled water, band-aids, antibiotic ointment, matches, condoms and wound care supplies.

In January 2015 to December 2015 there were 254 new clients and 2,984 visits with 199,404 new syringes distributed. In January 2016 to July 2016 there has been 324 new clients and 2,776 visits with 146,462 syringes distributed which means the numbers are going up fast in a short period of time. 19% of clients are under 25 years of age which are 68% male and 32% female, 15% are homeless, 82% report heroin as their drug of choice, 12% report methamphetamine use, 11% using prescription pills and 12% are in methadone treatment. Mr. Soto informed the Board that the majority of his clients are referred to Life Point by a friend or family so advertisement isn't needed. Clients are limited to 100 syringes per visit. 33.3% have tested negative for Hep C, another 19.5% report being positive and 70% have some kind of medical insurance. COPE Community Services are providing client services on the same mobile unit with LifePoint. COPE provides condom kits, bleach kits, hygiene kits, wound care supplies, additional staffing, linkage and referral to methadone, suboxone, and Behavioral Health Services, rapid HIV & Hep C testing, accudetox beads and information on drug treatment /detox. Mr. Soto stated when a client states they are interested on quitting he will ask the client several questions on their past drug use history to create a plan on where that client can start for detox.

8. CALL TO AUDIENCE

There were no speakers from the audience.

9. SUMMATION OF ACTION ITEMS AND PROPOSED AGENDA ITEMS

Dr. Horwitz gave a summary of the agenda items. July 27, 2016 Minutes were adopted as written.

Motion was made that the Board will approve Mr. Brian Eller's letter with a few added changes and to also copy Governor Douglas Ducey and Senator Sylvia Allen, Chairwoman, Senate Education Committee.

10. ADJOURNMENT

The meeting adjourned at 4:58 p.m.