

**MARICOPA COUNTY BOARD OF HEALTH MEETING**

**Monday, January 24, 2011**

**301 W. Jefferson Street, 10<sup>th</sup> Floor**

**Phoenix, Arizona 85003**

**Board of Supervisors Conference Room**

Mr. Cassano called the meeting to order at 3:00 pm.

**ROLL CALL:**

**Members Present:**

Don Cassano

Andrew Ingram

Zuhdi Jasser, M.D.

Francisca Montoya

Shannon Smith, RN

Brian Spicker

Maricopa County Supervisor Stapley, District 2

Kip Steill

**Members Excused:**

Audrey Adamic

Ex-Officio: Bob England, M.D.

**CALL TO THE PUBLIC:**

Don Cassano advised that if anyone from the public is present at the meeting today who would like an opportunity to speak, a Speaker Request Form is available and must be filled out prior to addressing the Board of Health. The Board of Health cannot take action on but only discuss questions from the public under the Call to the Public section.

**ACTION/DISCUSSION ITEMS:**

**1. Approval of the September 27, 2010 BOH Minutes:**

**-Mr. Cassano**

Shannon Smith motioned to approve the September 27, 2010 BOH minutes. Kip Steill seconded the motion. The motion passed unanimously.

**2. Fee Waivers**

**-Ms. Taylor**

Ms. Taylor presented 13 fee waiver applications to the Board of Health. The department of Environmental Services does not object to any of the 13 fee waivers.

The Board decided to take action on all 13 fee waivers collectively. Kip Steill made the motion to approve all 13 fee waiver applications. Don Cassano seconded the motion. The motion passed with a 5 to 1 vote.

*Dr. Jasser arrived at 3:15 pm, Mr. Spicker arrived at 3:20 pm*

**3. Determination of Future Meeting Schedule**

**-Mr. Cassano**

A discussion between the board members took place on changing the frequency of meetings. Questions were raised about the impact less frequent meetings would have on constituents or other departments (such as Environmental Health). A long term board member replied saying that the frequency of the public appearing in front of the Board of Health is very low and if necessary the option of holding a special meeting would be available or meeting online or by telephone would still be an option. There was also mention of having standing meetings by board members.

The Board of Health bylaws indicate that the board may meet monthly or quarterly dependent upon the board and chair. The bylaws do specify that an annually meeting in July take place.

After discussion, Kip Steill made the motion to move to quarterly meetings (four meetings annually) with one fixed meeting in July and that any agenda items that needed to be handled

sooner could call for a special meeting electronically. Brian Spicker seconded the motion. The motion passed unanimously with an 8 to 0 vote.

**4. MCEHC proposal for Chapters II, VIII, IX, and XI - Mr. Deshpande**

Mr. Deshpande said that the department of Environmental Services is currently working to put together a proposal of changes for these health specific health codes and that he would send a proposal to the secretary to send out to all of the BOH members by the next meeting.

Supervisor Stapley wanted to know if there could be some sort of debriefing online in case any of the members had questions about the proposal. Legal counsel mentioned that this would mean that this was an open meeting and all of the rules that apply to having an open meeting would apply to this. It was established that information could be sent to the Board Members collectively but that each board member would individually have to ask questions.

**5. Subcommittee Creation -Mr. Cassano**

The subcommittee creation was originally put on the agenda as a way to form sub committees so that the entire board didn't have to meet as frequent but with the change in the meeting schedule we don't need to establish any new sub committees.

The finance subcommittee that has already been established will be on the same quarterly schedule meetings as the general board of health meetings. Currently, Audrey Adamic, Don Cassano and Kip Steill are on the finance committee and we need two more members to be added to this committee based on our bylaws. Andre Ingram and Francisca Montoya volunteered to serve on this subcommittee.

**DISCUSSION ITEMS**

**1. Public Health Report -Dr. England**

**Dr. Bob England presented the following matters to the Board.**

**Infrastructure –**

In the affordable care act, prevention and public health fund was established and is a significant health care system to include primary prevention funding. The first year of that but we got two positions for policy improvement, the positions will post next week. We are creating a policy office. We took a significant cut in our block grant funds. We were granted approval to go broader than the kinds of programs we were doing directly. For example, the PLAY program which is a program that goes into schools and teaches the importance of physical activity. It is a great program but it is really tiny in reaching the number we would like. We are moving away from direct services and into bigger picture programs and that is what this new policy office will help do. I am really excited about what this office will be able to do.

Kip Steill asked what direction this policy office would be going. We are going to take the consensus of what our community partners say the needs is (schools, breastfeeding, physical activity, pushing to unlock the padlocks to schools for children to have access to playgrounds to be more physically active, etc.) We will take scientific evidence, cost benefit analysis and present to community board members and send health educators out from there.

**Programs –**

Center for Science and the Public Interest sent out a grade to the states on food born outbreaks and pathogens. Arizona received an F because our outbreaks are investigated to conclusion as to know what the organism was and the food was. The reason behind this grade is largely due to how public health offices prioritize; sometimes we skip things, being

that we have limited capabilities. The reality is that when our department sees something big our employees work very hard to manage it.

#### **Clinical Services –**

Tough year in legislature - \$280,000 is expected to be cut from AHCCCS. This would be a 15% off total budget in Healthcare for Homeless alone. On top of this, if they throw people of AHCCCS, the seriously mentally ill will also get tossed off and will expect a significant increase of mentally ill people to be on the street.

#### **Community Health Services –**

WIC numbers are down about 10% in the state. We are paid on a contract that says what are target is and now we are nowhere near that target. So, we will probably take a cut in WIC department. WIC is now currently 40% of our department which means this will be a huge effect. This could be from various reasons. A couple of them might include the new immigration law. Many people have fled combined with those who just are scared to come to anything with a County seal on it. However, this is not the whole issue because we are down across the entire racial spectrum. WIC currently covers prenatal and post natal for a child up to age 5. We are looking to future cuts in WIC.

*Supervisor Stapley left at 4:00 pm*

#### **Disease Update –**

Flu season is on the rise. There is mixed information in the news that it dragged on longer than usual or that it was rougher than usual but for the most part it is a regular flu season. Flu shots have been an absolute bust. We ordered a huge quantity under stimulus money in order to supplement kids without insurance. Our goal is to build a herd immunity and thought we would keep the momentum. Relatively few schools let us back in to do vaccines, only 2 let us back in and neither of them used the mass immunizers. Parents were frustrated, insured parents had a harder time finding flu shot than anyone. We've had our first pediatric death (teenager in the East valley) that didn't have any underlying health issues. Getting flu shots in schools is a huge goal. Some of the complaints about doing flu shots in the school is that it is disruptive to the school day, the billing process is extensive with so many forms.

This is where we can use policy. it is a priority because it is a simple solution. Our goal is to create a simple system, parent consent form only, don't request copays, etc. We would have a better chance to vaccinate and decrease flu in the community.

Shannon Smith asked what the departments' utilization of volunteers is. We haven't used a lot of volunteers. When we do have volunteers it is for the office of emergency preparedness. Being able to enlist a number of people and keep them active on a routine enough basis to use them for other projects isn't really successful. Shannon Smith believes that there are many people who would be willing to volunteer and that they just need to know the opportunities.

Brian Spicker wanted to know how the West Nile virus turned out. About 1/3 of all the cases in the nation were in Maricopa and more so in the east valley. The east valley is looking into ways to do more testing and to see what environmental issues are playing a part in this (i.e. abandoned homes, riverbeds, etc.)

#### **Adjournment**

Brian Spicker motioned to adjourn the meeting. Shannon Smith seconded the motion. The motion passed unanimously.