

# Polk County Advisory Board of Health Minutes

January 17, 2014 8:35

Members present: Donald Anderson, Thomas Newton, John Olds

Members absent: Reylon Meeks, Bobbretta Brewton

Agenda Items	Summary
<p><u>Approval of Minutes</u></p>	<ul style="list-style-type: none"> <li>• Minutes were approved.</li> </ul>
<p><u>Public Health Director Report (written report + comments)</u> <i>By Rick Kozin</i></p>	<ul style="list-style-type: none"> <li>• Rick reviewed two handouts: Polk County Health Department Annual Report and a summary of lead poisoning rates from 2008-2013. There has been a significant drop in the number of children identified with elevated blood lead levels during that time frame.</li> <li>• Rick reported that he and Scott presented the 2014/2015 Budget to the Board of Supervisors. The budget, if approved, would be for \$6.5 million and include a slight increase in non-grant expenses.</li> <li>• The 2013 school immunization audit has been completed. Just less than 3% (2.9%) of the children in Polk County schools are not fully immunized. This is 2409 children. The number has increased from 2009 when 1362 (1.9%) were not fully immunized. As part of this year's audit we are taking a closer look, in some of the schools, as to which specific vaccinations these children have not had (and share that information with the specific schools and districts).</li> <li>• Rick described the proposed outcomes that have been developed for all Health Department programs and strategies. The Board suggested we divide this list up over the 12-meeting calendar and have an extended discussion at least once a year of each key outcome.</li> </ul>
<p><u>Health Planning and Education Update</u> <i>By Tammy Keiter</i></p>	<ul style="list-style-type: none"> <li>• La Reina Latino radio-Dr Alarcon guest speaker for the month of January is talking about environmental health Radon awareness-kits available @ Health Dept for \$5 &amp; Use of pesticides during the winter months. La Reina Latino Magazine-for this month will feature an article on Winter Weather Health and Safety Tips.</li> <li>• Health Impact Assessment 101 provides advice to communities the same way a doctor advises their patients on how they can stay healthy. This advice helps communities make informed choices about improving public health through community design.             <ul style="list-style-type: none"> <li>○ Use Health Impact Assessments (HIA) to determine the potential effects of a proposed policy, plan, program or project on the health of a population and the distribution of those effects within the population.</li> <li>○ HIAs are one component of a broader “Health in all Policies” strategy “taking account of health and equity in the policies of other sectors.</li> <li>○ HIAs are interested in understanding how a decision (the proposed policy, plan or project) affects the various determinants of health, and how those impacts lead to health outcomes.</li> <li>○ Primary purposes of an HIA are to uncover and evaluate the health effects of a public decision. HIA may also be able to highlight health disparities by drawing attention to the differential distribution of existing or potential health impacts. Ultimately the HIA is meant to shape public decisions and the public discourse surrounding those decisions, and to make</li> </ul> </li> </ul>

	<p>health impacts a much more explicit part of the dialogue.</p> <ul style="list-style-type: none"> <li>○ HIAs also have the ability to better engage a diverse array of stakeholders, as well as empower certain communities to become involved in the decision making process that have historically been excluded from these political conversations.</li> <li>○ In the US, there are 270 HIAs completed or in progress. Topics include: Built environment (42%), Transportation (23%), Housing (8%), Labor and Employment (8%), Natural Resources and Energy (8%), Education (3%), Agriculture, Food and Drug (3%) and Climate Change (2%).</li> <li>○ Opportunities to obtain funding and/or Technical Assistance for HIAs in the future: <ul style="list-style-type: none"> <li>● Health Impact Project (the leading national initiative dedicating to promoting the use of HIAs in the US; a collaboration of RWJF and the PEW Charitable Trusts). Funding announcement (RFP) for “HIA Demonstration Projects” being released in February. Priority to applicants in regions where little HIA activity has occurred to date and priority to innovative topics for which relatively few HIAs have been completed.</li> <li>● NACCHO’s “HIA Mentorship Project” (part of an ongoing effort to increase the use of HIA among local health departments). Four LPHs already selected for 2013/14 projects</li> <li>● CDC’s “Designing and Building Healthy Places” Program (funds HIA projects across the country providing training and TA to awardees)</li> </ul> </li> <li>○ Question to the Board of Health when thinking about doing an HIA: Is there a decision regarding a policy, plan or project, currently under consideration within the community whose outcomes are likely to impact health?</li> </ul>
<p><u>Communicable Disease</u> By Kari Lebeda Townsend</p>	<ul style="list-style-type: none"> <li>● Tuberculosis Program: Three new TB patients were placed in isolation in December. One TB patient remains in isolation. Ten TB patients and one latent TB patient received direct observed therapy (DOT) in December. The Communicable Disease Team conducted 311 TB visits.</li> <li>● Common Communicable Diseases: In December, there were 15 new Pertussis cases with 395 contacts identified. The majority of Pertussis cases have been among 12 to 14 year olds.</li> <li>● Sexually Transmitted Diseases: In 2013, there was a slight decrease in the number of Chlamydia, Gonorrhea, and HIV cases handled by Public Health Investigators. In 2013, however, there was 19.6% increase in number of Syphilis cases from the previous year.</li> <li>● In 2013, strategies to address STDs included the following: <ul style="list-style-type: none"> <li>○ The STD Clinic began conducting oropharyngeal and rectal swabs to test for Chlamydia and Gonorrhea. It’s noteworthy that there have been patients with negative urine tests who tested positive for oropharyngeal and/or rectal Chlamydia or Gonorrhea.</li> <li>○ Public Health Investigators continued to provide partner services in Polk County. Partners identified by infected persons were confidentially notified of their possible exposure and received education, testing and treatment as appropriate.</li> <li>○ Outreach services were provided in a variety of community</li> </ul> </li> </ul>

	<p>based settings. In 2013, outreach clinics were held at MECCA Services, PRIDE, Iowa Youth Homeless Center, Blazing Saddle, Garden Nightclub and the LGBT Conference. During outreach events, HIV, Hepatitis C, and Syphilis testing was provided based on identified risks. Outreach was also created an opportunity to provide STD education and promote awareness of STD services at the Polk County Health Department. Many of the outreach events were conducted in collaboration with The Project and Project HIM of Primary Health Care, Inc.</p> <ul style="list-style-type: none"> <li>○ STD awareness was promoted in Polk County through press releases; articles in ACCESSline LGBT+ Newspaper and the Polk County Medical Society Bulletin; and a blast fax to providers.</li> <li>○ The PCHD distributed over 10,000 condoms in 2013. Other venues to distribute condoms to high risk and disproportionately impacted populations were also explored including condom dispensers (as displayed).</li> <li>○ A group of PCHD staff met during 2013 to identify new strategies to address STD rates in Polk County.</li> <li>○ Chlamydia and Gonorrhea re-infection rates were identified for Polk County.</li> </ul>
<p><u>Polk County Public Works</u> <i>By Bret VandeLune</i></p>	<ul style="list-style-type: none"> <li>● Environmental Health report to the BOH. As part of my update I provided information about Time of Transfer inspections and completing binding agreements due to the weather conditions. Also shared information regarding ongoing tanning, tattoo and swimming pool inspections.</li> </ul>
<p><u>Air Quality</u> <i>By Jeremy Becker</i></p>	<ul style="list-style-type: none"> <li>● 2013 Compliance Evaluations &amp; Frequency <ul style="list-style-type: none"> <li>○ Minor Sources –one inspection every 5 years. ~(830) <ul style="list-style-type: none"> <li>▪ 2013 Completed 405 inspections (full compliance evaluations)</li> <li>▪ Contract Goal: one inspection every 18-24 months</li> </ul> </li> <li>○ Major Sources – once every year. (18) <ul style="list-style-type: none"> <li>▪ 2013 completed 18 inspections (full compliance evaluations)</li> <li>▪ Contract Goal one inspection per year.</li> </ul> </li> </ul> </li> <li>● EPA’s Enforcement Priorities (2014-2016)- Every three years, EPA sets national enforcement initiatives to focus resources on serious pollution problem affecting communities. <ul style="list-style-type: none"> <li>○ Air- reducing air pollution from the largest sources and cutting hazardous air pollutants.</li> <li>○ Energy Extraction- assuring energy extraction, activities comply with environmental laws.</li> <li>○ Water- Keeping raw sewage and contaminated storm water out of our nation’s waters and preventing animal waste from contaminating surface and ground water.</li> <li>○ Hazardous Chemicals- Reducing pollution from mineral processing operations.</li> <li>○ Reducing Widespread Air Pollution from the Largest Sources, Especially the Coal fired Utility, Cement, Glass, and Acid Sectors <ul style="list-style-type: none"> <li>▪ Many industries have not complied with regulations, leading to excess emissions of air pollutants such as <u>sulfur dioxide, nitrogen oxides and particulate matter</u>. Emissions can have significant adverse effects on human health, including asthma, respiratory diseases and premature death.</li> <li>▪ <u>Coal fired power plants</u>, cement manufacturing facilities, sulfuric and nitric acid manufacturing</li> </ul> </li> </ul> </li> </ul>

	<p>facilities, and glass manufacturing facilities.</p> <ul style="list-style-type: none"> <li>○ Cutting Toxic Air Pollution that Affects Communities' Health <ul style="list-style-type: none"> <li>▪ The EPA will focus compliance efforts to reduce emissions of toxic air pollutants in three areas where the agency has determined there are high rates of noncompliance: <ul style="list-style-type: none"> <li>▪ <u>leak detection and repair</u>;</li> <li>▪ reduction of the volume of waste gas to flares and improvements to flare combustion efficiency;</li> <li>▪ Excess emissions, including those associated with startup, shut down and malfunction.</li> </ul> </li> </ul> </li> <li>● DNR Funding &amp; Federal Grants <ul style="list-style-type: none"> <li>○ Governor's Budget Recommendations – 2% increase for personnel costs</li> <li>○ House and Senate Appropriations Committees have agreed to provide funding for federal programs for FY 2014, including \$4.8 million increases for state and local air quality grants under Sections 103 and 105 grants.</li> </ul> </li> </ul>
<u>Nomination and Election of Officers</u>	<ul style="list-style-type: none"> <li>● Tom Newton moved and Dr. Olds seconded a motion to re-nominate the existing Chair (Dr. Anderson) and Vice Chair (Dr. Olds). Motion was approved.</li> </ul>
<u>Committee Member Comments</u>	<ul style="list-style-type: none"> <li>● None</li> </ul>
<u>Public Comments</u>	<ul style="list-style-type: none"> <li>● None</li> </ul>
<u>Adjournment</u>	Meeting adjourned at 9:50

**Next meeting February 21, 2014 at 8:30 a.m.**

Others present:

Rick Kozin, PCHD

Scott Slater, PCHD

Kari Lebeda Townsend, PCHD

Tammy Keiter, PCHD

Ralph Marasco, Polk County Attorney

Jeremy Becker, Polk County Air Quality

Bret Vandelune, Polk County Environmental Health

Lisa Brodsky, Bloomington Public Health