

# Sacramento County Public Health Advisory Board

## Meeting Minutes

January 4, 2017 (12:05 PM - 1:28 PM)

## Meeting Location

Primary Care Center  
4600 Broadway  
Sacramento CA 95820  
Conference Room 2020

**Moderator:** Dr. Steven Orkand

**Scribe:** Dr. Steven Orkand

**Board Attendees:** Paula Green, Dr. Jeffery Rabinovitz, Dr. Steven Orkand, Kimberly Sloan, Cathleen Ferraro, Dr. Olivia Kasirye

**Board Members Excused:** Dr. Sandy Damiano, Dr. Adam Dougherty, Barbara Law, Sherry Patterson-Jarrett

**Board Members Absent:** None

**Guest Speaker:** Amelia Schendel, WIC Director

**Guests:** Steve Heath, Executive Director, Capitol Health Network; Martha Moon, PhD., prospective member; Carol Jong, PhD., prospective member

**Meeting Opened** at 12:05 PM

**Welcome and Introductions**

Dr. Orkand welcomed PHAB members and guests.

### **Minutes Review**

Minutes from the December, 2016 meeting were approved as submitted.

### **PHAB Vacancies and Appointments**

Dr. Orkand announced that three highly qualified candidates had recently been interviewed, and that Board of Supervisor action was pending. There are currently 7 Board vacancies.

### **Public Health Division Update**

Dr. Kasirye reported that the flu season has been relatively mild. It is not yet clear how efficacious this year's vaccine has been. There has been no shortage of vaccine.

### **Sacramento County Women, Infants, and Children Program (WIC)**

Guest speaker: **Amelia Schendel**  
**WIC Director**

The WIC Program is a Supplemental Nutrition Program that is federally funded through the Department of Agriculture, with bipartisan support. The goal of WIC is to improve pregnancy outcomes and promote optimal health and growth in children 0-5 years, through education in nutrition and health and the provision of specific nutritious foods. WIC's target population is low to medium-income families (up to 185% of federal poverty level) that include a pregnant or postpartum woman, an infant, or a child under the age of five years. Women who just had a miscarriage or abortion and foster parents can also receive WIC benefits. WIC families attend appointments at the WIC office every one or two months, at which time they attend nutrition class or meet with a nutrition counselor, and then receive a packet of vouchers for purchase of specific nutritious foods to improve nutritional intake. Through receiving nutrition education, referrals to medical care, and supplemental foods, WIC families improve their nutrition and health status. Because of the established link between breastfeeding and optimal health, all WIC agencies employ various measures to support and promote breastfeeding during the prenatal, postpartum and early childhood years. These measures include breastfeeding classes,

individual support for lactation mothers and food prescriptions tailored to the nutritional needs of breastfeeding women. There are currently 4 permanent WIC sites and 2 satellite sites in the County. The satellite sites are located in churches. It is helpful to have sites that are close to the target populations. The population served is very diverse. There are 19 languages represented. The Sacramento County DHHS WIC Program currently serves about 25,000 people.

Many mothers leave the hospitals and have problems feeding their new babies. WIC provides an important service to this population. Locally, there are two peer counsellors, one Russian-speaking, the other Spanish-speaking. They lead peer groups that provide a lot of practical and psychological support. Often, WIC serves as an intermediary, helping its clients understand their doctors' advice. Pediatric residents from UC Davis come to WIC to observe its program. They are introduced to lactation issues, and observe a counselling session or a class. Nursing and dietetic students also observe at WIC, and some come back to volunteer their services.

WIC has an active social media platform, including Facebook and Instagram. An online application process is available. Sacramento WIC collaborates with other safety net programs, and also with State WIC. They have been a test site for new programs. Local WIC centers provide referrals for other services. They often do onsite dental screening and developmental assessments.

Dr. Rabinovitz expressed some concerns about communication between WIC and community pediatricians. Ms. Schendel agreed, stating that the lactation consultants often have difficulty reaching the pediatricians. Paula Green asked if WIC provides paperwork that clients can present to their doctors. Ms. Schendel said that this approach may work with better educated patients, but that some of their clientele are unable to make the necessary connections for follow-up.

WIC dietitians provide subject matter expertise to other County programs, such as the Mental Health Treatment Center, Youth Detention Facility, the jails, Public Health, etc. WIC infuses a large amount of federal funds into the local retail food economy.

WIC has been receiving funding from First 5 since 2002 for its Community Lactation Assistance Project. Dr. Kasirye noted that since First 5 revenue is decreasing (fewer smokers); funds available to share with WIC will also decrease. This will become a problem in 2018. A strategic planning process is currently underway to determine how to respond to this. WIC provides opportunities for interns and residents of various educational institutions, including UCDCMC pediatric trainees to observe WIC activities to gain understanding of the WIC Program as part of their community rotation. Dr. Orkand suggested that some funds may be available to compensate for the experience WIC provides for medical, nursing

and dietetic students. Dr. Kasirye thought this might be difficult to accomplish because WIC is known as a government agency, and outside funders often won't donate to government-supported programs.

An early notification system has been developed. Hospitals inform WIC of Medi-Cal mothers who have recently delivered. WIC does outreach to these mothers. The program is in play at Sutter and Mercy.

### **PHAB Planning for 2017**

PHAB members were asked to submit suggestions for our study and action topics for 2017, and most complied. Some of the suggestions will be covered by speakers who have already been arranged. Others are topics that are the primary responsibility of other Boards or Committees.

**Kim Sloan** mentioned the quality and distribution of cancer screening services in the County. That's already one of our committees, and the research will continue.

Kim also proposed that we study mental health and addiction treatment parity. The Mental Health Parity Act is federal legislation that requires that annual or lifetime dollar limits on mental health benefits offered by group health plans or health insurers be no lower than any such dollar limit for medical and surgical benefits. Kim wonders how well these guidelines are adhered to in Sacramento County. She is aware that there is also a Sacramento County Mental Health Board, and may attend some of their meetings. She wonders if this could also be an area of study for PHAB. Dr. Kasirye pointed out that the Mental Health Board's meetings are open to the public. For further education, Uma Zykovsky, Director of the Division of Behavioral Health Services, will be invited to attend a PHAB meeting to bring us up-to-date.

**Cathleen Ferraro** suggested we evaluate the consequences of recent legalization of marijuana for recreational use. There will likely be an impact on the number of people driving under the influence of marijuana, and she feels this should be discussed. Dr. Kasirye mentioned an upcoming conference that will deal with these issues from a public health and an environmental perspective. Lori Vallone Miller is the Health Program Director for Alcohol and Drug Services in the Division of Behavioral Health Services. We will invite her to provide information in this area. Dr. Kasirye suggested that we wait to see what impact the Trump administration has on federal marijuana enforcement.

Cathleen also proposed that we study the health effects of cumulative inadequate sleep. The health benefits of adequate, restful, restorative sleep are well-known. Longstanding poor sleep hygiene is a stress-trigger. Poor sleep can also effect

driving, domestic violence, and others. Dr. Orkand mentioned medical errors due to sleep deprivation in physicians. The impact of sleep deprivation in shift workers has also been studied. Cathleen suggested that there may be speakers at DMV or California Highway Patrol knowledgeable in this area. Several speakers spoke about the health benefits of good sleep. But others were not certain this would be a valuable topic because the advice “get good sleep” is too obvious.

**Paula Green** is interested in a trauma prevention program. California Assembly Bill 1785 was just signed by Governor Brown. This law prohibits a person from driving a motor vehicle while holding and operating a handheld wireless telephone or wireless electronic communication device. Distracted driving continues to be a significant public health problem. When looking at causes of death in the County, cancer and cardiovascular diseases are prominent. However, looking at the younger age groups, unintentional injury rises to the top, and motor vehicle accident is the major cause. In California \$4.48 billion is lost because of MVAs. California has responded with a graduated driving age program, but this is often not respected by parents or enforced by law enforcement.

Paula has helped bring a trauma prevention program to Solano County, where she works. It is called “**Impact Teen Drivers.**” <http://www.impactteendrivers.org/> It is a collaborative program between Solano County Department of Public Health, CHP, North Bay Health Care, Kaiser, and some local fire departments. The educational curriculum was developed by a non-profit organization of the same name, and it is taught in schools and elsewhere. In the schools, the curriculum may be delivered to a health education class or to an assembly. It is free. There is another program in the schools, “Every 15 Minutes,” which deals with drunk driving. It is effective, but very expensive. Because of this, schools are pulling away. Impact Teen Drivers targets children as early as 6th grade. Grant money is available to support this program. Paula envisions a collaboration in Sacramento County, just as in Solano. Trauma prevention is generally underfunded, so a grant program like this could be win-win. Kelly Browning, PhD, who helped develop this program and introduced it to a number of counties, lives in Citrus Heights. She is a former school principal. She may be available to advise. This program is evidence-based. At the assemblies, school children are exposed to emotional stories about loss. This apparently has a greater impact than the “blood-and-guts” presentations often given. It may be easy to duplicate this program in Sacramento. The biggest roadblock is getting the school boards to buy-in.

**Dr. Jeff Rabinovitz** has suggested we study lead level monitoring in the County. It is not clear that the current guidelines for testing are sensible. Currently, only those defined as “high risk” children are routinely tested. But new information suggests higher risks throughout the population. Dr. Kasirye pointed out that the CDC has recently changed the level of lead that should cause concern. There is currently no “safe” level. The State Water Board is now requiring all schools to test lead levels at their fountains at least once each year, and to repeat lead level testing if there is an abnormality. Testing will also be extended to day care centers.

Dr. Rabinovitz also raised the issue of vitamin D testing. Childhood rickets (vitamin D deficiency) is a serious, disabling condition. Unfortunately, the understanding of optimal vitamin D levels is in flux. It may be valuable to educate ourselves about this issue.

**Martha Moon**, who is not yet a member of the Board, suggested that we look at discrepancies in health care experienced by African-Americans and by the homeless. Dr. Kasirye confirmed that there is another Committee looking at the issue of childhood deaths in the African-American community. Bob Erlenbusch, Executive Director of the Sacramento Regional Coalition to End Homelessness will speak to PHAB in February, and this topic will come up.

**Carol Jong**, who is also not yet a member of the Board, suggested that we look at the homeless death rate. She pointed out that mortality in 2016 was much higher than last. This topic will be discussed next month.

Carol also suggested that we look at drug (especially opioid) addiction and the overdose epidemic. We will ask Lori Vallone Miller, from the Opioid Task Force, to report on their progress.

**Steve Heath** suggested that PHAB look at the Refugee Health issue. Dr. Orkand noted that the director of the Refugee Clinic will speak to PHAB later this year.

Dr. Orkand said that he is personally interested in the possibility of bringing a trauma prevention program to Sacramento County. He is also interested in whether lead levels are tested appropriately in Sacramento County.

An on-line ballot will be sent to PHAB members, then finalized at the next meeting.

### **Announcements**

Dr. Orkand announced that he would be filling one of the PHAB seats on the Human Services Coordinating Council. Paula Green fills another. There remains one vacancy.

Dr. Orkand will be meeting soon with Supervisor Serna to discuss our syringe-exchange recommendation. This meeting was at the Supervisor's request.

## **Public Comment**

There was no further comment.

## **Adjournment**

The meeting was adjourned at 1:28 PM.

**Minutes submitted by Dr. Steven Orkand, Chair and Scribe.** Some additions were provided by Amelia Schendel.

## **Next PHAB Meeting**

February 1, 2017, 12:00 - 1:30 PM  
Primary Care Center  
4600 Broadway  
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