## 333 S. State Street, 2<sup>nd</sup> Floor Boardroom (Room 2002)

#### I. Roll Call

Quorum was established based upon the following:

**Present In-Person:** Joel Johnson, MEd

Óscar Iván Zambrano, MPH, MBA, CDM

Matthew M. Davis, MD, MAPP

Debra Wesley, MSW Rosa Martínez Colón, MS

Carmen Vergara, MPH, RN-BSN

Steven Rothschild, MD

For the Department: Fikirte Wagaw, MPH, Acting Commissioner

Chicago Department of Public Health

**Absent:** Janet Lin, MD, MPH, MBA

Horace E. Smith, MD

#### II. Call to Order

The meeting was called to order at 9:00am by Carmen Vergara, MPH, RN-BSN Acting President.

Rosa Martínez Colón requested an addition be made to the standing agenda reflected under *New Business* regarding a clarification of the role of board members.

#### **III.** Approval of the Minutes

The Board voted and approved the July minutes.

#### IV. Commissioner's Update

Acting Commissioner Fikirte Wagaw provided the following department wide COVID and non-COVID updates:

- Introduction of Acting Commissioner, Fikirte Wagaw
- Bureau of Community Health Strategy
  - o Upcoming Healthy Chicago Symposium on Friday, August 18<sup>th</sup>
    - Celebration of progress to date on the Healthy Chicago 2025 goals and strategies. Call to action for continued work as being showcased in the, soon to be released, Health Chicago Equity Zones Playbook
  - Chicago Tobacco 25 Year Report will be released by CDPH's Chronic Disease team later this month
    - Details tobacco control initiatives and progress on reducing smoking rates in Chicago since the nationwide Master Settlement Agreement with cigarette manufacturers in 1998

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- Outlines steps to take with communities to advance policy initiatives that will further protect communities from tobacco and its harmful effects
- CDPH has concluded its public engagement phase of the citywide Cumulative Impact Assessment (CIA)
  - Co-hosted three large, in-person events dedicated to assessment with EJ organizations over the summer
  - Participated in tabling at several community-led events to gather community insights and lived experience data
  - Next step is to finalize CIA deliverables and to publicly release the CIA results by early September
- Community Health Bureau and Office of the Chief Medical Officer are coordinating CDPH's response with the healthcare system and non-healthcare CBO partners during the Medicaid Redeterminations
  - Critical public health issue because Chicagoans who lose Medicaid coverage may no longer be able to seek healthcare, or afford or access their prescriptions, or be turned away by hospitals, healthcare providers, including mental health providers, due to lack of insurance
  - Hardest-hit communities will be Black and Latinx Chicagoans, immigrants, people with limited English proficiency, people experiencing homelessness, and people with disabilities are at greater risk of losing coverage
  - CPDH is coordinating reenrollment activities and communications/outreach with the State and Chicago Public Schools' Children and Family Benefits Unit to mobilize forces on the ground to support Chicagoans most at-risk for losing Medicaid coverage. CDPH continues to receive several media inquiries, with Dr. Geraldine Luna representing CDPH on this issue.
- Community Health Response Corps started Bystander CPR classes in Spring 2023
  - Over 50 Response Corps workers joined the initial Bystander CPR kick off which was co-hosted by CDOH and the American Heart Association
  - Over 1,666 Chicagoans on the South and West side have been trained by Response Corps members. 2,028 city residents provided resource navigation services

#### Bureau of Behavioral Health

- Substance Use Updates
  - Public Health Vending Machines with harm reduction products will be launching in 5 locations in Chicago in September- they will have naloxone, fentanyl and xylazine test kits, hygiene kits, tampons, pads, socks, and underwear at no cost

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- Over 9,500 Narcan kits distributed through Chicago Public Libraries in its partnership with CDPH
- CDPH distributed several hundred fentanyl test strips and Narcan kits ahead of and on days of Lollapalooza, and partnered with Pitchfork to ensure that staff at that festival were able to hang out Narcan to attendees
- CDPH has increased its Aldermanic harm reduction partners to include Alderman Mitchell (7<sup>th</sup> ward), Alderwoman Fuentes (26<sup>th</sup> ward), and Alderwoman Manaa-Hoppenworth (48<sup>th</sup> ward). All of these offices have been trained on overdose prevention and offer Narcan and test kits to the community
- The MAR NOW Program that services people with opioid use disorder is expanding this month to provide medications to treat alcohol use disorder. This will increase volume of patients served by immediate treatment program

#### • Bureau of Disease Control

- o COVID-19 Updates
  - Cook County's COVID-19 Hospital Admission Level is low. New hospitalizations per 100,000 population for Cook County has increased from 1.4% to 1.9%
- o Seeing increases in COVID-19 activity nationally and locally now as well.
- New Arrivals
  - Death in child with GI illness while traveling via bus from Brownsville, Texas to Chicago
    - CDPH coordinated with Marion Co and IDPH to identify illness etiology/COD (pending) and connected family to care and support travel to destination in Indiana
    - No infectious etiology of public health concern has been identified (final autopsy findings pending).

## Federal Updates

- Extension approval for ELC COVID-19 funds is pending. Highlighted the importance of sustained flexible core funds for response to urgent public health threats.
- WH is standing up the Office of Pandemic Preparedness and Response Policy (OPPR)- a permanent office in the Executive Office of the President (EOP) charged with leading, coordinating, and implementing actions related to preparedness for, and response to, known and unknown biological threats or pathogens that could lead to a pandemic or to significant public health-related disruptions in the United States.
- HHS Announces the Formation of the Office of Long COVID
   Research and Practice and Launch of Long COVID Clinical Trials
   Through the NIH RECOVER Initiative.

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- o Respiratory Viruses
  - (August 4<sup>th</sup>, 2023) One human infection with a new variant of the influenza A (H1N1) virus was identified in Michigan- first H1N1 virus infection in a human in the US this year. Exposure to swine at an agricultural fair. No symptoms were identified among close contacts or family members and no additional cases related to this agricultural fair were identified
  - (August 3<sup>rd</sup>, 2023) CDC announced it is recommending new immunization starting this fall to help protect all infants under 8 months and some older babies at increased risk for severe illness cause by respiratory syncytial virus (RSV).
- West Nile Virus (WNV) and other Vector-Borne Diseases
  - First WNV suspected cases are pending confirmatory testing at CDC and expected to be confirmed in coming days (1 Chicago; 1 IL).
    CDPH will coordinate with IDPH to issue press releases for communication and prevention/mitigation messages.
  - There are ongoing chikungunya outbreaks in many countries in South America. An unexpected increased proportion of neurological complications have been associated with infection, and there are questions about the co-circulation of multiple CHIKV genotypes.
    - Chikungunya is not commonly found in US. Most cases are from people who have traveled outside of the US and were infected there. So far, no locally acquired cases have been reported 2016- 2023 in US.

### **Board Member Comments and Questions:**

- **Joel Johnson:** Regarding the 9,000 Narcan Kits- where are the vending machines located and where are the other public areas? Are there other places we should target for those?
  - Looking into CTA areas and others. Must navigate any potential legal issues. Suggestions provided to include public transportation and areas around the city, as well as commercial entities and corporations.
- **Mattew Davis:** Regarding seeking extension of time with covid funds- what is at risk if it is not extended?
  - The issue mainly lies within knowing what and what is not funded fully and working with sustainable resources to continue interventions and programs put in place or that have been lifted up over the last few years.
  - Also seeking additional corporate dollars in budget this year and seeking new grant funding- prioritizing the work we are doing to see what needs more.
- **Debra Wesley:** What is the plan around COVID? Preparing our city for what is to come and make informed decisions around managing their health.

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- Plan to maintain many innovations in place- Data Dashboard, PIO team will be utilized, infrastructure with Chicago Health Equity Zones and Community Health Response Corps to engage residents in education and vaccination, vaccine clinics every fall, etc.
- **Dr. Steven Rothschild:** Last month we talked about new arrivals and RFP for coordinated services. When will we see that? Also, the child who died in transit-understanding the screening process is important to relay to our neighborhoods.
  - o The RFP is more focused on managing the shelters.
  - New arrivals are screened and if needed, they will get a medical exam at the border. Every city shelter provides an intake of health-related questions. The challenge is the intermediate locations – police stations.
     MRC volunteers and others are going out to help screen at those sites.
- **Joel Johnson:** Judy King brought up a potential violation of HIPAA at Martin Luther King location and across mental health clinics- patients must sign in at a desk. Has this been brought to your attention, and can we look at best practices that are being used at mental health clinics?
  - Yes, there is a privacy officer from CDPH investigating. We will update as soon as we know more.

## V. <u>Board President's Comments:</u>

Dr. Steven Rothschild read a statement from Dr. Janet Lin in her absence.

Statement noted the previous letter to the Mayor written by the board and its intentions: 1. Acknowledge the accomplishments made by CDPH over the past four years, 2. Reiterate the importance of continuing the progress made and work that still needs to be done for the health of Chicagoans, 3. Discussion regarding public health funding levels, 4. Recommend key attributes important for any Commissioner of CDPH candidate. In addition, recognition, and gratitude of Dr. Arwady and support for the acting Commissioner, Fikirte Wagaw, was made. Concluded with a commitment to furthering the mission of achieving health, safety, and well-being for all Chicagoans.

## VI. Presentations:

#### **Department:**

Chicago Department of Public Health

Title:

Syndemic Infectious Diseases Bureau: Viral Hepatitis Surveillance Unit **Speakers:** 

Ashley Becht, MPH, CPH, Director of Disease Investigations Syvlia Dziemian, Program Director

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### **Board Member Comments and Questions:**

- **Dr. Steven Rothschild:** There is an importance of screening and treatment-requires months and is very expensive. In lieu of redetermination, what happens next when residents lose access to those treatments?
  - CDPH working closely with the state and ensuring that people have support and access
- **Dr. Matthew Davis:** For the newly diagnosed group, are these presented with acute hep to healthcare provider vs. screening?
  - o Confirmed lab cases are screened in professional settings.
- **Debra Wesley:** Would hate to see successes get buried or stop through transition such as Family Connects and others. Given thought to making more affirmative action and support to continuing those programs.

### **VII. Public Comments**

There were two written public comments from Judy King that were read in full

The first comment noted that the Board of Health did not read or discuss Judy King's previous comment submitted before the August Special Board of Health Meeting. Also highlighted that the procedure put in place to address the no systematic access to laboratory services or the retrieval of externally obtained laboratory test results for people attending CDPH mental health services issues brought up by the Community Mental Health Board of Chicago in 2019 has since ended and that this should be fixed.

**Response:** The comment did not pertain to the special meeting as indicated in Public Comment request and was informed said comment would be noted during the regularly scheduled Board of Health Meeting.

The second comment, also submitted by Judy King, noted that a previous comment submitted by Judy King in June was not included verbatim in the June BOH minutes. The comment notes a privacy issue regarding signage at the Mental Health Center. The comment also asks for the Division of Mental Health (Behavioral Health) to have policies for providing access to a clinician with medication prescribing authority when the clinics are closed. In addition, the comment also calls for CDPH to provide the Community Mental Health Board with a copy of the Division's written procedures that address 24/7 access, as recommended by CARF.

#### VIII. Standing Business

## • Policy Update:

- o Federal: None
- o State: House bill 2039 was signed by the Governor earlier this month
- o City: Cumulative Impact Assessment report coming out in early September
- Budget: Departments are required to submit new budget request submissions for corporate dollars

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### IX. New Business

Statement made by Rosa Martínez Colón.

Discussed the letter from the Board of Health written to the Mayor, describing concerns regarding the letter and the Board's role in it. Recommendations requested for immediate clarification of the Board's role in present and future matters, a review of the Open Meetings Act, and for a system to be put in place to follow up on suggestions brought forth by Board members. The statement concludes with a request for process examination regarding agenda items and where additional items and input can be made.

## **Board Member Comments and Questions:**

- **Dr. Matthew Davis:** Added discussion on how to advise both CDPH and Mayor's Office correctly.
- **Dr. Steven Rothschild:** Suggested inviting legal or ethics office to address questions posed.
- **Joel Johnson:** It is our responsibility to stay up-to-date on duties and policy of this board.

#### X. Old Business

Voted and approved: Board of Health meetings will now be held on the last Wednesday of every month for the rest of the year, in the same time frame: 9 am-10:30 am.

## XI. Adjourn

The meeting was adjourned at 10:30am by Carmen Vergara.