

Chicago Board of Health
Meeting Summary March 18, 2015
DePaul Center, 333 South State Street

Roll Call

Board Members Present

Carolyn C. Lopez, M.D., President
Melanie Dreher, Ph.D., R.N., F.A.A.N
Adele Joy Cobbs, M.D.
Caswell A. Evans, Jr., D.D.S., M.P.H.
Victor M. Gonzalez
Steven K. Rothschild, M.D.
Joseph B. Starshak

Board Members Absent

Carl C. Bell, M.D.
Horace E. Smith, M.D.

For the Department

Julie Morita, M.D., Acting Commissioner

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Call to Order: The meeting was called to order at 9:10 a.m. by Dr. Lopez, Board President.

Approval of Minutes: The February 2015 minutes were unanimously approved.

Update from Commissioner: Dr. Morita provided the status of Healthy Chicago 2.0 Planning. On February 27, our epidemiology team presented preliminary findings of the Chicago Health Status Assessment to the Partnership for Healthy Chicago, a group of more than 30 organizations that contribute to CDPH's planning efforts. The data will be used by the Partnership and CDPH to develop the strategies for the new city-wide health agenda, to be released later this year.

Dr. Morita reported on two Ebola incidents that occurred at O'Hare airport and how the process is improving to maintain the anonymity of patients identified with Ebola. CDPH is working collaboratively with hospitals and the Illinois Department of Public Health to ensure Ebola crisis support is available in the future.

Lastly, Dr. Morita announced Chief Health Officer Stephanie Whyte, MD is leaving her position. Dr. Morita will plan to disseminate this job description and two other vacant positions to the Board. The other positions include: Chief Medical Officer and Medical Director for the Preparedness Program.

Comments by the Board President: Dr. Lopez welcomed the UIC students attending the meeting and explained the Board of Health is an advisory board that provides advice on health matters and ordinances, along with the its advocacy role, such as supporting Chicago's Clean Indoor Air ordinance and regulations.

Policy Update: Jesse Lava reported CDPH analyzed Gov. Rauner's proposed 2016 budget and determined that our funding could be reduced in several areas, including anti-smoking efforts, heroin addiction treatment, psychiatry, and mental health for the uninsured. However, he noted that negotiations will continue through the spring and the extent of the cuts is not certain.

Mr. Lava reported State Senator Heather Steans has introduced a bill (SB 1800) that would empower CDPH to require low-risk food establishments to engage in a process called self-certification. These establishments will have to review their own compliance with food safety standards and improve protocols when necessary. The requirement would apply specifically to low-risk food establishments, such as grocery and convenience stores that sell only pre-packaged food on site. This bill would allow CDPH to better protect residents by focusing its inspections on higher-risk food establishments more likely to contribute to the spread of foodborne illness.

In addition, several state bills relevant to public health have been introduced or amended in the last month. Two examples: (1.) HB 2812 and SB 1754, which provide that when insurance companies mail patients an explanation of the benefits, they may not divulge sensitive information, since the person who usually receives the letter (the policy holder) will not be the same person in the household who received the service. The idea is that people's privacy fears shouldn't keep them from receiving STI tests, mental health treatment, etc. (2.) HB 1, which is a massive substance abuse reform bill. For example, it would include methadone as a covered service under Medicaid, all police and fire departments would be required to provide training on the use of naloxone to reverse drug overdoses, the IDPH medical director will have the power to issue standing orders to let pharmacies dispense naloxone, and many more other related provisions. The bill's overall goal is to treat opioid addiction as a public health problem, rather than a criminal justice problem.

Lastly, Mr. Lava reported legislation is being proposed to make it harder to obtain religious exemptions

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for immunizations.

Dr. Dreher inquired if the reform bill HB 1 includes other drugs besides naloxone to treat heroin. Mr. Lava explained naloxone is the only one specified for overdose reversals but other drugs are mentioned for different kinds of treatment, including methadone. Dr. Cobbs commented buprenorphine is covered under Medicaid for just one year. Dr. Lopez pointed out that it would be worth looking into the criminal justice issue, and Mr. Starshak suggested having a future meeting directly on this subject and the economic aspect of it. Dr. Dreher added that it would be interesting to look at how other countries deal with this issue, e.g. Jamaica has made drug use legal.

Presentation: Chicago Ebola Preparedness Update – Suzet McKinney, DrPH, MPH, Deputy Commissioner and Stephanie Black, MD, MSc, Medical Director provided an overview of the ebola crisis in West Africa, symptoms and transmission and Chicago’s preparedness efforts. Drs. McKinney and Black’s presentation included details on the process of monitoring high risk individuals in Chicago. At the culmination of the presentation, the Board members asked various questions and Mr. Gonzalez remarked that it was his understanding that the UIC hospital is not subject to local ordinances and asked if this leads to an issue of not reporting Ebola. Dr. Black informed him that the epidemiology staff at this hospital has been highly engaged with CDPH and Dr. McKinney confirmed they have been compliant with the CDPH’s preparedness program.

Old Business: None.

New Business: None.

Public Comment: None.

Adjourn: The meeting adjourned at 10:35 a.m.

Next Board Meeting: April 15, 2015, 9:00 a.m.