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MEETING
STATE OF CALIFORNIA
HEALTH AND HUMAN SERVICES AGENCY
DEPARTMENT OF PUBLIC HEALTH
PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT
ADVISORY COMMITTEE

CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
KINGS RIVER CONFERENCE ROOM
1616 CAPITOL AVENUE
SACRAMENTO, CALIFORNIA

MONDAY, FEBRUARY 8, 2016
3:04 P.M.

JAMES F. PETERS, CSR
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A P P E A R A N C E S

ADVISORY COMMITTEE MEMBERS:

Wes Alles, Ph.D., Co-Chairperson

Caroline Peck, M.D., Chairperson

Christy Adams, R.N., B.S.N., M.P.H.

Paul Glassman, D.D.S., M.A., M.B.A.

Stephen McCurdy, M.D., M.P.H.

Vicki Pinette

Dan Spiess

Samuel Stratton, M.D., M.P.H.

Wilma Wooten, M.D., M.P.H.

STAFF:

Ms. Anita Butler, Block Grant Coordinator

Mr. Hector Garcia, Block Grant Coordinator

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P R O C E E D I N G S

CO-CHAIRPERSON ALLES: Well, Anita, was that my cue then to welcome everybody and thank them for giving of their time, not only on the call, but also in preparation for this, for their commitment to public health. And I think the first order of business is to go through the roll call, and we'll count that as the introduction, how's that.

BUSINESS OPERATIONS SECTION CHIEF BUTLER: Sounds good, and I'll turn it over to Hector to do the roll call.

PHHSBG COORDINATOR GARCIA: Okay. Manal Aboelata?

Christy Adams?

ADVISORY COMMITTEE MEMBER ADAMS: Here.

PHHSBG COORDINATOR GARCIA: Wes Alles?

CO-CHAIRPERSON ALLES: Here.

PHHSBG COORDINATOR GARCIA: Paul Glassman?

ADVISORY COMMITTEE MEMBER GLASSMAN: Here.

PHHSBG COORDINATOR GARCIA: Ira Lubell?

Stephen McCurdy?

ADVISORY COMMITTEE MEMBER McCURDY: Yes. Good afternoon.

PHHSBG COORDINATOR GARCIA: Caroline Peck?

CHAIRPERSON PECK: Here.

PHHSBG COORDINATOR GARCIA: Vicki Pinette?

1 ADVISORY COMMITTEE MEMBER PINETTE: Yes.
2 PHHSBG COORDINATOR GARCIA: Dan Spiess?
3 ADVISORY COMMITTEE MEMBER SPIESS: Yes.
4 PHHSBG COORDINATOR GARCIA: Samuel Stratton?
5 ADVISORY COMMITTEE MEMBER STRATTON: Here.
6 PHHSBG COORDINATOR GARCIA: Wilma Wooten?
7 No show.
8 Nathan Wong?
9 Not here.
10 Okay. We've got a quorum.
11 CO-CHAIRPERSON ALLES: All right. Thank you very
12 much.
13 So the next item then is the minutes. And they
14 were sent out in advance. And typically, we discuss the
15 issues that are raised by individuals who attended in the
16 past -- in the past. And the minutes are always done by
17 the court reporter, so typically they're accurate and
18 there's not a lot of confrontation. But if there needs to
19 be, we'll make the time for that to happen.
20 I wonder if anybody had any questions or comments
21 from the minutes that you'd like to raise?
22 ADVISORY COMMITTEE MEMBER McCURDY: Steve McCurdy
23 here. I only had a small correction.
24 CO-CHAIRPERSON ALLES: Go ahead, Steve.
25 ADVISORY COMMITTEE MEMBER McCURDY: On page four

1 under Item 4, they talk about quote, "health disease",
2 when it obviously is meant to be, "heart disease".

3 CO-CHAIRPERSON ALLES: Yeah.

4 BUSINESS OPERATIONS SECTION CHIEF BUTLER: We'll
5 make that change.

6 CO-CHAIRPERSON ALLES: Thank you. Anybody else?

7 Okay. Hearing none, then I would like to get a
8 motion and a second and vote on the -- oh, first of all,
9 before we do that, I have to ask if there is any public
10 comment. And that reminds me that members of the public
11 may join in on the call or may be present in the room.
12 And I wonder if there is anybody from the public who would
13 like to identify themselves?

14 Okay. Then in that case, I will ask if there's a
15 motion a second, and we'll do a vote by voice on approving
16 the minutes.

17 ADVISORY COMMITTEE MEMBER McCURDY: Move to
18 approve. Steve McCurdy here.

19 CO-CHAIRPERSON ALLES: Thank you, Steve.

20 ADVISORY COMMITTEE MEMBER ADAMS: Christy Adams,
21 second.

22 CO-CHAIRPERSON ALLES: Okay. We have a motion
23 and a second. We'll call the question for approval of the
24 minutes.

25 All those in favor signify by saying aye?

1 (Ayes.)

2 CO-CHAIRPERSON ALLES: Any nays?

3 Any abstentions?

4 Okay.

5 ADVISORY COMMITTEE MEMBER SPIESS: Yeah. This is
6 Dan Spiess. I wasn't in attendance, so I will abstain.

7 CO-CHAIRPERSON ALLES: Thank you. Thank you very
8 much.

9 Okay. So we move on down then next to Caroline,
10 and she's going to talk about the fiscal year 2016 and '17
11 budget update.

12 CHAIRPERSON PECK: Thank you very much, Dr.
13 Alles. We have good news for the federal fiscal year '16
14 and federal fiscal year '17 update. The Congress has
15 determined ceiling funding levels for both of those fiscal
16 years. And they are higher than they had been in prior
17 years. And they have also determined the amount for the
18 Preventive Health and Health Services Block Grant, which
19 is in the Prevention and Public Health Fund. It is \$160
20 million nationwide. So that is flat funding from prior
21 year. And we anticipate that the number will be the same
22 in federal fiscal year 2017. So despite the, you know,
23 threats to the prevention and public health fund, it seems
24 to still be surviving.

25 The California allocation has not yet been posted

1 on the CDC website. So, at this time, we are assuming
2 that we will get the same allocation we were awarded last
3 year, which is approximately \$10.3 million. And that's
4 all I really have to say.

5 Are there any questions?

6 CO-CHAIRPERSON ALLES: Okay. Thank you. Any of
7 the Committee members have a question or want to engage
8 Caroline in some conversation about what she reported?

9 Okay. Thank you. Then we have the
10 presentation -- oh, I should also ask about the public.
11 This will be the last time I do that, if there are no
12 members of the public. But I just want to make sure that
13 if somebody didn't want to identify themselves, if they
14 want to make a public comment relative to this point,
15 please speak now?

16 Okay. Hearing none -- did somebody just join us?

17

18 ADVISORY COMMITTEE MEMBER WOOTEN: Yes. Wilma
19 Wooten.

20 CO-CHAIRPERSON ALLES: Welcome. We're about
21 midway through the agenda. We're down on the presentation
22 of the selection criteria, and Hector is going to provide
23 that information to us.

24 PHHSBG COORDINATOR GARCIA: Okay. Well, the
25 selection criteria serves as all of you know the

1 principles for allocation. And I want to thank each
2 member of the Advisory Committee for contributing to the
3 success of this document. While 2014 is the last time
4 that the selection criteria was revised, it continues to
5 be a document that's evolving. And this process of
6 evolution could not continue without the assistance of the
7 Advisory Committee's continued interest and support.

8 The selection criteria has three distinct
9 sections. The first section is by the Advisory Committee,
10 the second is from ASTHO, and the third section is from
11 our own Department

12 Let me go into the first section very briefly.
13 In the first section the emphasis is primary and secondary
14 prevention programs. Primary prevention includes
15 prevention of future injury among injured -- the injured
16 population. And the Advisory Committee has also
17 recommended that we fund each program at least three
18 years, that we do not transfer monies out of the Block
19 Grant Program, and that we prioritize using the following
20 criteria:

21 Condition severity, size of the problem or
22 condition, equity in health status, community concern,
23 programs engage communities at the local level, the cost
24 of the condition, cost effectiveness of interventions,
25 concordance with Healthy People objectives, other

1 resources available to address the conditions, performance
2 on program metrics, the needs of EMSA should be
3 considered, innovations in areas for which there are few
4 proven interventions, ability to cross sectors and
5 disciplines, leverage of other funds, impact of
6 terminating programs, appropriate balance between
7 infrastructure versus program services, History/longevity
8 of programs, and reconfiguration/modification of program.

9 And these are not in any particular order.

10 The next section is from the Association of State
11 Territorial Health Officials:

12 Maintain flexibility for use of funds, encourage
13 funds to be used for evidence-based programs, ensure
14 adequate reporting and accountability for use of funds,
15 link with strategic goals of the State and Healthy People
16 2020, support capacity such as development of quality
17 improvement and performance management, and ensure that
18 health equity cuts across funded programs.

19 The third section is from the California
20 Department of Public Health:

21 Rank priority provided by Centers; public health
22 reinvestment perspective; previous federal or general fund
23 cuts sustained; marginal utility, in other words, more
24 bang for the buck; availability of alternate funding
25 sources; potential to fund internally, year-end general

1 fund savings for one-time costs, and incorporate in
2 distributed overhead; overcome -- outcome of budget
3 revision process; input from Advisory Committee and public
4 hearing; ease of implementation in requiring time frame;
5 and scalability.

6 And that really covers the selection criteria.
7 And with that, I think I'd like to turn this over to Anita
8 Butler.

9 BUSINESS OPERATIONS SECTION CHIEF BUTLER: Thank
10 you, Hector. And before I get started, Dr. Alles, did you
11 want to make a comment?

12 CO-CHAIRPERSON ALLES: Yeah, I did. Thank you
13 for remembering that.

14 One of the things that doesn't appear -- that
15 Hector didn't mention is the issue about the difficulty
16 that the Director of Public Health would have in making
17 decisions about things that evolve during the year.
18 Circumstances happen, and it may be necessary for the
19 Director to make decisions that would shift money not in
20 direct opposition to the principles that were read by
21 Hector, but rather in order to create the greatest amount
22 of leverage for the funds that we receive.

23 And there was also a recognition by the Committee
24 that the Department itself is much more aware of the kinds
25 of contingencies that may benefit a department if it had a

1 little bit more money and would not harm a department, for
2 instance, if it was receiving a little bit less, because
3 the Director of the Public Health Department needed to
4 make some kind of a decision similar to that.

5 So the point that I wanted to make is that this
6 came up actually from the Committee. It was not a -- it
7 was not a request of the Director. It was not a request
8 of the Department, but it was a recognition of the
9 difficulty of doing business in a fluid society and a
10 fluid economy.

11 So anybody want to comment on that last one?

12 Okay. Then, Anita, why don't you go ahead and
13 continue with the business relative to the anticipated
14 funding.

15 BUSINESS OPERATIONS SECTION CHIEF BUTLER: Great.
16 Thank you so much, Dr. Alles.

17 So I'd like to turn your attention to document
18 number 5, which you would have also received in advance of
19 the meeting. And this is just an overview of the total
20 funding, and then I will go into the directorate's
21 proposal shortly thereafter.

22 So, as Dr. Peck mentioned, we anticipate
23 receiving flat funding in federal fiscal year 2016.

24 I'm getting some feedback. Can everyone hear me
25 okay.

1 CO-CHAIRPERSON ALLES: Yes.

2 BUSINESS OPERATIONS SECTION CHIEF BUTLER: So we
3 anticipate receiving about \$10.3 million, of which
4 \$832,969 is set-aside for the Rape Prevention Program,
5 which is housed within the California Department of Public
6 Health.

7 The remaining balance is 9.5 million. And 10
8 percent of that is used for admin. And the difference of
9 8.5 is then split between CDPH and the Emergency Medical
10 Services Authority. CDPH received 70 percent, and EMSA
11 receives 30 percent. So that's just an overview of the
12 total funding.

13 In terms of the Director's proposal for the
14 federal fiscal year '16 grant, which is slated to be used
15 in State fiscal year 16/17, the Director's office is
16 proposing that we flat fund programs. So there will be no
17 new programs and existing programs would receive flat
18 funding.

19 And I'd like to just show you this chart, which
20 is Document 6, which identifies the current allocation,
21 which is for federal fiscal year '15, and what the
22 Director's office is proposing for federal fiscal year
23 '16.

24 So the first program is Accountable Communities
25 for Health. That's a pilot program, and the proposed

1 allocation is \$224,000 The California Active Communities
2 Project, including Sr. Falls is \$590,841. The California
3 Health Alert Network Support is \$356,748. The California
4 Wellness Plan implementation is \$379,200. The
5 Cardiovascular Disease Prevention Program is \$524,819.
6 Commodity Specific Food Surveillance is \$150,000.
7 Community Water Fluoridation is \$260,560. The Health
8 Economist is \$109,300. HIV Care and Partner Services
9 using HIV Surveillance Data is \$375,000. Let's Get
10 Healthy California Website and Dashboard, \$280,000.
11 Nutrition Education and Obesity Prevention Branch
12 \$468,039.

13 Office of Health Equity, which includes the
14 Health Equity Assessment, \$491,688. The Office of Quality
15 Performance and Accreditation, \$187,500. Prescription
16 Drug Overdose Workgroup, \$140,000. Preventive Medicine
17 Residency Program, \$528,464. Receptor binding Assay,
18 \$206,250. Safe and Active Communities Branch \$244,919.
19 Select Agent and Biosafety is \$150,000. Valley Fever and
20 Other Emerging Diseases, \$319,500.

21 So the total for CDPH with the exception of the
22 Rape Prevention set-aside and the administration costs is
23 \$5,986,827. And then the remaining funds are given to the
24 Emergency Medical Services Authority. And they have about
25 seven programs.

1 So the first is Emergency Medal Dispatch,
2 \$90,711. Emergency Medical Services for Children,
3 \$123,800. EMS Health Information Exchange is -- that one
4 is \$389,580. The next one is EMS Partnership for Injury,
5 \$78,515. EMS Poison Control System is \$108,691. EMS
6 Pre-Hospital Data is \$595,573. EMS STEMI and Stroke,
7 \$269,178. EMS planning, \$651,198. And finally, EMS
8 Trauma Care Systems, \$258,537. And that combined total is
9 \$2,565,783.

10 And as Hector mentioned in the criteria,
11 these -- this recommendation by the Directorate is in
12 alignment with all of the criteria identified in the block
13 grant selection criteria and aligns with the AC's
14 recommendation to fund programs for at least three years.

15 So with that, I'll turn it over to you, Dr. Wes.

16 CO-CHAIRPERSON ALLES: Okay. Thank you very
17 much, Anita. Well done both Anita and Hector.

18 I wanted to get comments or questions from the
19 Advisory Committee at this point?

20 Okay. Hearing none.

21 ADVISORY COMMITTEE MEMBER GLASSMAN: This is --

22 CO-CHAIRPERSON ALLES: Go ahead.

23 ADVISORY COMMITTEE MEMBER GLASSMAN: Sorry. Wes,
24 can you hear me? This is -- yeah, this is Paul Glassman.
25 I just want to say a word about the community

1 fluoridation -- water fluoridation item. This is not a
2 request to change the allocation, because flat funding is
3 flat funding, and I'm not trying to make an argument that
4 it has a different priority than other things.

5 I just want to point out for the record that,
6 like other things, the money that's allocated is not going
7 nearly as far as it used to, not just because of
8 increasing costs, but a significant change has been the
9 fact that the Department of Public Health consultants are
10 now spending a lot of time educating policymakers in
11 roll-back campaigns. The number of communities in
12 California, there's some currently underway right now,
13 where people in the community are trying to take away
14 water fluoridation that's already been there and was
15 fought hard for.

16 So it's taking -- it's just taking more and more
17 effort for both the Department staff and community and the
18 consultants to be able to deal with these roll-back
19 campaigns. And I just want to have that noted for the
20 record, and something to consider for future years when
21 there might be additional funding available.

22 CO-CHAIRPERSON ALLES: Thank you very much.
23 That's an important point. Are there other comments?

24 Okay. Let me ask if anybody in the public may
25 have joined us, if you have a point you'd like to make?

1 Okay. I think that we've covered the priorities
2 Hector covered those in his presentation. And I wonder if
3 any member of the Committee would like to recommend --
4 would like to make a comment about the existing
5 priorities. They've served us for probably, I don't know,
6 10 years or more. We bring them up every time we have a
7 conference call or a meeting. And I want to make sure
8 that people are still comfortable with the existing
9 priorities.

10 Okay. Then I'll ask one more time if any member
11 of the Committee would like to make a comment, because the
12 next item on the agenda is a recommendation to the
13 Department. And that recommendation would be that we
14 would provide the same funding to each of the programs.
15 None of the programs will -- it fits within our three
16 year -- our recommendation that programs be funded for
17 three years. And that similar to the issue with
18 fluoridation, inflation will have -- and other factors
19 will have maybe made it more difficult for some programs
20 to get by with the same amount of funding. But since that
21 is what we have and that was the recommendation of the
22 Director, I want to give you just one more chance to see
23 how you feel about that recommendation and the priorities?

24 Okay. Hearing none.

25 Then I would like to have a motion and a second

1 before we vote. And the recommendation would be that we
2 accept the Director's recommended funding for the programs
3 within this particular block grant, and that we support
4 the recommendation.

5 So may I have a motion, please?

6 ADVISORY COMMITTEE MEMBER WOOTEN: Wilma Wooten,
7 San Diego, so moved.

8 CO-CHAIRPERSON ALLES: Thank you, Wilma.

9 ADVISORY COMMITTEE MEMBER GLASSMAN: Paul
10 Glassman, second.

11 CO-CHAIRPERSON ALLES: Okay. Thank you. Any
12 further comment?

13 All in favor signify by saying aye?

14 (Ayes.)

15 CO-CHAIRPERSON ALLES: Any oppose?

16 Any abstain?

17 Okay. Then we come to the next steps. And
18 Hector, maybe you could fill us in on that.

19 PHHSBG COORDINATOR GARCIA: Okay. Well, I just
20 want to state that after today, we will begin the process
21 of writing the State plan. We are moving forward with the
22 belief that, as stated earlier, that funding will be at
23 \$10.3 million. And it is our intention to share that
24 State plan with the Advisory Council as quickly as
25 possible, hoping that we can meet as soon as May, but it's

1 hard to tell when that will actually take place.

2 We will be having a training session coming up.
3 It's really a refresher course for the different programs
4 to get together and go over the State plan. We will be
5 distributing templates for that purpose, and they will be
6 distributed in our SharePoint.

7 And basically, I guess that's about it. We will
8 be meeting with the public in May. And that's about all
9 at this point.

10 One of the things that I would like to do is to
11 state that as -- this is coming -- this is the end of our
12 2016 discussion, and that I would like to turn this over
13 to Anita to discuss a matter of importance having to do
14 with 2013 and 2014 grant years.

15 Anita.

16 BUSINESS OPERATIONS SECTION CHIEF BUTLER: Thank
17 you, Hector. So before we conclude for the 2016
18 discussion, Dr. Alles, would you like to make a comment
19 about that?

20 CO-CHAIRPERSON ALLES: No.

21 BUSINESS OPERATIONS SECTION CHIEF BUTLER: That's
22 okay. I just wanted to give you the opportunity.

23 (Laughter.)

24 BUSINESS OPERATIONS SECTION CHIEF BUTLER: So in
25 terms of the 2013 and 2014 updates, I wanted to make you

1 all aware that CDC will be conducting a three-day
2 compliance review of our 2013 and 2014 grants. The
3 compliance review will take place in the spring of 2016,
4 and we are anticipating that that will be in late April or
5 early May.

6 The last site visit took place in 2009, so it's
7 been a while. And we're happy to welcome them here and
8 definitely take the opportunity to meet with them to
9 discuss our activities.

10 The presence of Dr. Karen Smith, the CDPH
11 Director, and State Health Official -- Health Officer has
12 been requested by CDC on both the first and last days of
13 the site visit.

14 The compliance review will focus on federal
15 fiscal year '13 and federal fiscal year '14. And it will
16 begin with an overview of our activities followed by
17 individual program presentations and fiscal meetings
18 designed to demonstrate our successful implementation of
19 the block grant, as well as assure that correct management
20 of funds took place.

21 CDC will conduct an exit interview on the final
22 day, in which they will share their findings, and engage
23 us in discussion. They will send a letter to the Governor
24 with a description of the results of their compliance
25 review, and we will definitely share that letter with you

1 all, if you'd like to see it.

2 Do you have any questions about that?

3 CO-CHAIRPERSON ALLES: Would you like a member or
4 two or three from the Committee, if they could make it, to
5 be there or is that of no significant value to the audit
6 process?

7 BUSINESS OPERATIONS SECTION CHIEF BUTLER: No,
8 that's a great idea, Dr. Alles and we'd welcome that. If
9 people are interested in attending, we would definitely
10 welcome that. And even if they couldn't attend in person,
11 if they could attend by phone, that would be great.

12 CO-CHAIRPERSON ALLES: Thank you. Keep us
13 apprised then as that comes up with plenty of notice --

14 BUSINESS OPERATIONS SECTION CHIEF BUTLER: Okay.

15 CO-CHAIRPERSON ALLES: -- so that we can -- if we
16 are interested, we could either come to Sacramento or to
17 be on the phone for the presentation, and maybe to ask
18 questions, if that's necessary.

19 BUSINESS OPERATIONS SECTION CHIEF BUTLER: Sounds
20 great. And we recognize how busy members of the Advisory
21 Commit are, so we'll make sure that we tailor it down to a
22 specific section, unless you all want to be involved in
23 the entire process.

24 CO-CHAIRPERSON ALLES: Okay. Thank you.

25 Caroline, is there anything that you would like

1 to say before we end?

2 CHAIRPERSON PECK: Yes. Thank you, Dr. Alles. I
3 have a few additional comments to make. And the first is,
4 is that we do have a program outcomes document, because
5 all of the programs have objectives, you know, on a yearly
6 basis. And Hector has done a fabulous job in compiling
7 all of those. So we will share those with the Advisory
8 Committee in the next couple of months.

9 In general, the programs are doing very well.
10 And we'd like the Advisory Committee to know what they
11 have achieved over the course of their funding year.

12 The second thing is that although the Director
13 wanted to have flat funding for all of the programs this
14 year, they're very interested in using the block grant
15 to -- for its maximum impact, and so we'll be embarking on
16 a prioritization process for the federal fiscal year 2017
17 funds. In which case, they will be evaluating all the
18 current programs, except for the funding going to EMSA,
19 because that -- and for rape prevention, which are
20 set-asides, and may be making changes to programs in the
21 future.

22 I wanted to let the Advisory Committee know that.
23 So even though there's no changes proposed for this year,
24 there may be an opportunity for greater input by the
25 Advisory Committee next year.

1 The third thing I'd like to say is to just really
2 thank the block grant administrative staff. This grant
3 involves a huge amount of work. And so Ms. Anita Butler
4 and Mr. Hector Garcia, Ms. Mary Rogers, and we have
5 several other administrative staff who are not in the room
6 today, but I just want to thank them for all the work they
7 do with the budgets and providing support to the programs
8 to get in all of the CDC deliverables.

9 And I also want to thank the programs for all the
10 wonderful work that they've been doing over the past year
11 with these funds we get from the federal government. We
12 know there's a lot we ask of programs to come -- for this
13 money, and we really appreciate how you time -- you give
14 us timely all of our -- the required documents and for all
15 the work you're doing out in the community. So thank you
16 very much.

17 CO-CHAIRPERSON ALLES: That was a great report.
18 Thank you very much, Caroline.

19 One final time, any member of the Committee want
20 to comment on something that Caroline said?

21 ADVISORY COMMITTEE MEMBER GLASSMAN: Yeah, this
22 is Paul Glassman. Really it's a question, but Dr. Peck
23 you answered it partly. The question I was going to ask
24 is about the opportunity for the Advisory Committee or
25 others to propose new programs. So I've been on the

1 Committee for the last several years, the discussion has
2 been around prioritization and the amount of money to give
3 to the programs that are on the list. And that's been the
4 same programs on the list since I've been on the
5 Committee.

6 And I'm wondering is there -- and I appreciate
7 what you just said, Dr. Peck, about the fact that in 2017
8 there will be an evaluation of those programs. But what
9 I'm wondering about, is there an opportunity to get new
10 programs into consideration. And just for an example
11 would be that California is significantly out of
12 compliance with a CDC requirement for a third grade oral
13 health surveillance. We haven't done one in over 10
14 years. And the last one was done by a private -- sort of
15 private funding, which was almost 10 years ago as well.

16 So the ability to even have information about the
17 level of dental use, which is critical to be able to plan
18 policy and advocate for funding is pretty difficult by not
19 having the information we need. So it's just an example
20 of the kind of thing that I would love to see on the list,
21 but I haven't seen a process for proposing new programs.
22 So I'm just wondering is there one?

23 CHAIRPERSON PECK: Yeah. Thank you so much, Dr.
24 Glassman. That is a wonderful example, and I know dear to
25 our new State Dental Director's heart, Dr. Kumar, who is

1 in the room with us. And, yeah, I think that is the
2 intent of the Director's office is really to think about
3 where public health should strategically be in 2035, and
4 how can we use these block grant funds to achieve
5 those -- achieve the vision of the Director's office.

6 So there will be a chance for input from the
7 Advisory Committee and to where public health is going in
8 the future and how these funds are used. And we will
9 inform you when that happens.

10 At this point, we're -- you know, we're -- this
11 meeting is really about 2016, but we realize that we're
12 going to have to have an Advisory Committee earlier on in
13 the year, so that we can gain input from the Advisory
14 Committee members about what new programs, you know,
15 should be funded.

16 And if there is flat funding, that would involve
17 de-funding or decreasing funding for current programs.
18 But the Director has said that that's the direction she
19 would like to go in.

20 CO-CHAIRPERSON ALLES: Other questions, comments?

21 I'd like to entertain then a motion to adjourn
22 the meeting. Get a motion and a second. And one more
23 time I want to thank you all for your interest and
24 enthusiasm for serving the people of the State.

25 So may I have a motion please to adjourn the

1 meeting?

2 ADVISORY COMMITTEE MEMBER GLASSMAN: Paul Glass
3 man, so moved.

4 CO-CHAIRPERSON ALLES: Second?

5 I'll second then.

6 (Laughter.)

7 CO-CHAIRPERSON ALLES: All in favor aye?

8 (Ayes.)

9 ADVISORY COMMITTEE MEMBER WOOTEN: I think you
10 get it with Wilma Wooten and then Paul.

11 CO-CHAIRPERSON ALLES: Oh, okay. Very good.
12 Thank you.

13 All in favor signify by saying aye?

14 (Ayes.)

15 CO-CHAIRPERSON ALLES: Any nays?

16 Any abstentions?

17 Okay. Thank you once again, and the meeting is
18 adjourned.

19 (Thereupon the meeting adjourned
20 at 3:39 p.m.)

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C E R T I F I C A T E O F R E P O R T E R

I, JAMES F. PETERS, a Certified Shorthand Reporter of the State of California, do hereby certify:

That I am a disinterested person herein; that the foregoing California Department of Public Health Preventive Health and Health Services Block Grant Advisory Committee meeting was reported in shorthand by me, James F. Peters, a Certified Shorthand Reporter of the State of California, and was thereafter transcribed, under my direction, by computer-assisted transcription;

I further certify that I am not of counsel or attorney for any of the parties to said meeting nor in any way interested in the outcome of said meeting.

IN WITNESS WHEREOF, I have hereunto set my hand this 10th day of February, 2016.



JAMES F. PETERS, CSR
Certified Shorthand Reporter
License No. 10063

