

**WEBINAR MEETING
STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH
PREVENTIVE HEALTH AND HEALTH SERVICES BLOCK GRANT
ADVISORY COMMITTEE**

THURSDAY, APRIL 2, 2020

10:03 A.M.

JAMES F. PETERS, CSR

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APPEARANCES

ADVISORY COMMITTEE MEMBERS:

Jessica Núñez de Ybarra, M.D., M.P.H., FACPM, Co-Chair

Stephen McCurdy, M.D., M.P.H. Co-Chair

Christy Adams, R.N., M.P.H., Ph.D.

Amber R. Cordola Hsu, Ph.D., M.P.H.

Dan Spiess

STAFF:

Monica Morales, Deputy Director

Fatima Castaneda, PHHSBG Business Operations Chief

Matthew Herreid, PHHSBG Fiscal Lead

Rebecca Horne, PHHSBG Coordinator

Amy Yan, Program Specialist

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Welcome and Introductions

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Good morning. This is Dr. Jessica Núñez de Ybarra, Chief of the Chronic Disease Control Branch at the California Department of Public Health. Thank you for participating this morning in our Preventive Health and Health Services Block Grant Advisory Committee webinar. We are attempting for the first time to have an advisory via webinar and would appreciate your patience as we ensure that all presenters this morning are able to hear my voice and -- so let me run a test quickly and then we will begin. Dr. Steven McCurdy, are you on the line?

CO-CHAIRPERSON McCURDY: Yes, I am. Can hear you fine, Jessica.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you. Dr. McCurdy is our co-chair for this meeting. The next presenter I want to check is Monica Morales, Deputy Director for the Center for Healthy Communities. Are you on the line and can you hear me?

DEPUTY DIRECTOR MORALES: Hi, Jessica. This is Monica. Can you hear me?

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Yes. Wonderful. This is terrific news. I want to again thank everyone for their patience. That ends my test. Also, I believe our very wonderful coordinator Rebecca Horne is also on the line. Rebecca, can we hear you as well?

PHHSBG COORDINATOR HORNE: Good morning, everyone. This is Rebecca. Can you hear me?

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Yes, perfectly. All right. Thank you, everyone. That's a wonderful test. So, again, I want to remind you that in our webinar we have all the resources for documentation in the system and we'll review those items momentarily. What I'd like to be doing now is to ask Matt to take roll call of our Advisory Committee Members.

PHHSBG FISCAL ANALYST HERREID: Greetings, Committee. I want to make sure before I start that the AC contact information and affiliations are current in Attachment D1, Dog 1. Please contact us immediately after this meeting if any updates are needed. I will begin roll call. Christy Adams?

ADVISORY COMMITTEE MEMBER ADAMS: Present.

PHHSBG FISCAL ANALYST HERREID: Thank you. Wes Alles? Paul Glassman? Stephen McCurdy?

CO-CHAIRPERSON McCURDY: Yes, I'm here. Thank you.

PHHSBG FISCAL ANALYST HERREID: Thank you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Amy, can you kindly move the screen so people on the webinar can see the names and the contact information as Matt is reviewing them? Thank you.

PHHSBG PROGRAM SPECIALIST YAN: Will do.

PHHSBG FISCAL ANALYST HERREID: Dr. Jessica is six feet away from me and I know she's in attendance.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you so much.

PHHSBG FISCAL ANALYST HERREID: Vicki Pinette? Dan Spiess?

ADVISORY COMMITTEE MEMBER SPIESS: I'm here.

PHHSBG FISCAL ANALYST HERREID: Thank you. Samuel Stratton? Wilma Wooten? Nathan Wong? Amber Hsu?

ADVISORY COMMITTEE MEMBER CORDOLA HSU: Here.

PHHSBG FISCAL ANALYST HERREID: Thank you. That completes our roll call.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: I would like to thank the participating members, many of whom have longstanding service, for being available today. Your historical knowledge is invaluable to us and to California. I'd also like to acknowledge to all on the line that we have a court reporter transcribing the meeting. I would request that any individual speaking clarify who they are and the court reporter will alert us if they have any difficulty understanding what we have communicated for purposes of the record. Thank you for your understanding of this. Also, let me now begin my introduction. I, Jessica Núñez de Ybarra, am now the Principal Investigator for the Block Grant and Co-Chair of this advisory. We want to share with you again during this pandemic, our gratitude for those of you that were able to join us this morning. Your ongoing input, guidance, and direction is much appreciated.

Today's meeting is to review and approve the June 4th, 2019 Advisory Committee meeting minutes, to review the State fiscal year 2020-21 proposed funding allocation, and to obtain Advisory Committee recommendations and approval for those allocations.

Again, we've reviewed the Advisory Committee document. And now I'd alert -- or ask you to look at document two, which is the agenda for this meeting. We intend to stick to the agenda and anticipate the meeting will go quickly today. We know all of you have serious work to do in this pandemic. Now, I'd like to turn it over to Dr. Stephen McCurdy to welcome everyone and to tell us a little bit about himself and his new role. Again, Dr. McCurdy has worked on the Advisory Committee and we appreciate his willingness to Chair --Co-Chair this meeting.

CO-CHAIRPERSON McCURDY: Hello. Thank you, Jessica. And I'd like to welcome all of our participant today, especially in these trying times. I am a professor -- now, Emeritus Professor at the University of California, Davis in the Department of Public Health Sciences. As Jessica noted, I've been on the Committee for a number of years and I was pleased step in as co-chair today. So with that, I'll turn it back over to Jessica.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you Stephen. Next, I just want Monica Morales to introduce herself to welcome the group. I also want Monica -- or for the group to

know that Monica will give an update for us in Item 3 on the agenda, but this is just her welcome. Monica, please do.

DEPUTY DIRECTOR MORALES: Hi. Good morning, everyone. Thank you so much for just taking time to join us today. We do understand that there is a great need for us to refocus right now on all the multiple levels of work that are taking place in the Department of Public Health pertaining to COVID, but we also know that some of the --our key programs, including our PHHS awards are very important during this time, because they do help facilitate and reduce some of the risks pertaining to COVID that our program is working on. So with that, thank you for being here. Thank you for allowing us to still move those forward. I look forward to learning a little bit more about you and what everyone else is doing as well. Thank you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you so much. What I'd like to be able to do now is to continue this introduction theme by now having the Committee members that are in attendance to say hello. So Christy, do you want to give a brief introduction, please?

ADVISORY COMMITTEE MEMBER ADAMS: Sure. Thank you. So Christy Adams here. I'm the Trauma Prevention Coordinator at the UC Davis Medical Center here in Sacramento. We're a Level 1 adult and pediatric trauma center.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you so much for being available today. We really appreciate your dedication to the work and to our collaboration. Dan, did you want to say

ADVISORY COMMITTEE MEMBER SPIESS: Sure. Thank you. I'm Dan Spiess, former CEO of NorCal EMS serving five counties in north eastern California. I left that position as of July 1, but I'm still on board in a limited part-time basis and still participating with the Committee. Thank you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Well, we really appreciate your leadership and your willingness to work with us. And your experience in the field is invaluable to us as a Committee member. Amber, would you like to say a few words. Amber, are you on mute? Do you want to say a few words?

ADVISORY COMMITTEE MEMBER CORDOLA HSU: Hi. I'm sorry about that. Yes, I am on mute. Hi. My name is Amber Cordola Hsu. I'm an Assistant Project Scientist at UC Irvine. I work closely with Dr. Nathan Wong at the Heart Disease Prevention Program. And we publish extensively on heart disease, heart failure, many facets of heart disease and along with those with diabetes. So thank you for having me.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: What a tremendous talented group on the line today. Again, this is going to be a great and fruitful meeting. So the last is to ask our Block team to introduce themselves. We'll start with Matt here in the room and Fatima here in the room in Sacramento with me. And then we'll go online to Rebecca and Amy that are telecommuting today. Matt.

PHHSBG FISCAL ANALYST HERREID: Yeah. This is Matt Herreid. I am the Block Grant Fiscal Analyst.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, Matt. We appreciate your dedication to our work.

PHHSBG BUSINESS OPERATIONS CHIEF CASTANEDA: Good morning, everybody. This is Fatima Castaneda. I'm the Business Operations Chief over the Block Grant.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Rebecca.

PHHSBG COORDINATOR HORNE: Good morning. This is Rebecca Horne. I'm the Block Grant Coordinator. Thank you for being here.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Amy.

PHHSBG PROGRAM SPECIALIST YAN: Good morning. My name is Amy Yan. I'm the Program Specialist for the Block Grant. I joined the team in October and I'm responsible for providing support for the team as well as the program staff receiving block grant funds.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Wonderful. And in the spirit of transparency, we want to ask any other State, either Department of Public Health or Emergency Management Services Agency program staff to introduce themselves by name and program.

MR. ROSENHALL: Hi. Good morning. This is Jeffrey Rosenhall with the California Department of Public Health Injury and Violence Prevention Branch. Thank you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, Jeffrey.

MS. HELLAND: Good morning. This is Linda Helland with the Office of Health Equity, Health Equity Policy and Planning Unit.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you very much appreciate it. Next.

MS. KELLEY: Good morning, This is Kelly and I'm with the California Department of Public Health's Fusion Center.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, Kelly.

MS. MCGINNIS: Hi. This is Amy McGinnis. I'm with the California Department of Public Health's Fusion Center along with Kelly.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Wonderful. Thank you, ladies.

MS. STOLLER: Good morning. This is Elizabeth Stoller. I'm with the Tuberculosis Control Branch in the very busy Division of Communicable Disease Control in the California Department of Public Health.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you so much Elizabeth.

MS. STOLLER: Thank you.

MS. KWONG: Hi. This is Sandy Kwong from California Department of Public Health, Chronic Disease Surveillance and Research Branch.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Good morning, Sandy. Thank you for being on the line.

MS. LEE GUTIERREZ: Hi. This is Linda Lee Gutierrez with the Nutrition, Education, and Obesity Prevention Branch.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you.

MS. STRENG: Hello. This is Kathy Streng. I'm also in Linda's Branch, the CDPH Nutrition, Education, and Obesity Prevention Branch.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you.

MS. MURTO: Hi. This is Christine Murto, CDPH, Office of Refugee Health.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Wonderful. Thank you.

MS. FERNANDEZ: Good morning. This is April Fernandez with the CDPH Office of Binational Boarder Heath under the Center for Infectious Diseases.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, April.

MS. OSFELD: This is Susan Osfeld with the Office of Refugee Health.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, Susan. Anyone else? We also want to ask any member of the public who wishes to introduce themselves to do so now. All right. I'd like to --

DR. BRUNNER: This is Wendel Brunner from the California Chronic Disease Prevention Leadership Project.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Wonderful. Thank you, Dr. Brunner for joining us this morning. Anyone else from the public? So I want to share with you as you review the agenda that there are opportunities for public comments and discussion. So we will alert you to those opportunities. I will also be, at times, leaning on Ms. Rebecca Horne for guidance, if necessary, during some of this conversation. All right. So the only other rule I'd ask is if you're not speaking on this call or webinar, please mute your phone. Also, remember to identify yourself prior to giving a response, so the court reporter correctly identifies you and the comments you make. Your input is critical to this process. So we thank you for your patience and understanding.

I would like to now turn it over to Dr. McCurdy so we can move to Agenda Item 2, the Advisory Committee review and discussion of the meeting minutes. Stephen.

PHHSBG AC Review and Discussion of the June 4, 2019 Meeting Minutes

CO-CHAIRPERSON McCURDY: Yes. Thank you. So again, Stephen McCurdy here. And we're on Item 2. And I'd like to turn your attention to document D3. That's D as in David, 3, which is a court reporter's transcript of the last meeting that this Advisory Committee held, which was April 4th, 2019. So the word-for-word transcription is there in that document should anyone be interested in checking it out. Let me now turn your attention to document D4, D as in David, , which is the summary of those minutes. And I would like to just take a moment to recap what I've seen as the major points in them. And at that meeting of June 4th, 2019, it was noted that the block grant folks had fully met 46 out of 56, that's a little over 82 percent of the objectives. And of the remaining ten, five of them, or half of them, 2 were partially met. Thanks to the Block Grant activities, there were a total of 145 activities noted and fully met were 121 of them. Again, that's a little over 80 percent of all activities fully met. Of the 24 that were not fully met, ten of them were partially met. Second important point noted in those minutes is that the funding that we had received from the -- from the block grant in 2019 was actually about \$800,000 less than we had received in the prior year, that is in 2018. However, the Committee, at that time, noted that there was an expectation that savings could be made -- that that shortfall could be made up with savings from the State Health Department. Finally, the State plan, at that June 4th meeting was approved and was subsequently submitted to the CDC. So that's what I see as the -- as the major points. Let me just stop for a moment and ask my colleagues if there's any that -- points that I've missed that they feel should be included in that list? And hearing none, we'll move on. So is there any discussion then of the meeting minutes and summary? And I would like to emphasize that we -- that public comment, at this point, is certainly welcome. Okay. Hearing none. What I would like to do then is go on and ask for a motion from the Advisory -- from the Advisory Committee to approve the minutes from that meeting of June 4th, 2019. Do I hear a motion for approval?

ADVISORY COMMITTEE MEMBER SPIESS: Well this is Dan Spiess and I --

ADVISORY COMMITTEE MEMBER ADAMS: This is Christy Adams, I move to approve. Sorry. Go ahead.

CO-CHAIRPERSON McCURDY: Dan Spiess, why don't I ask you to go forward. I think you were on first.

ADVISORY COMMITTEE MEMBER SPIESS: Yeah. I was not in attendance at that meeting, so I would not be able to take action on it.

CO-CHAIRPERSON McCURDY: Okay. If you had a chance to read them and feel confident in putting forward a motion for approval, I will accept that from you. Do you wish to do that?

ADVISORY COMMITTEE MEMBER SPIESS: Well, then I would second Christy's motion.

CO-CHAIRPERSON McCURDY: Okay. Christy, did you -- did you move for approval.

ADVISORY COMMITTEE MEMBER ADAMS: Yes, I did. Thank you.

CO-CHAIRPERSON McCURDY: Very good. Okay. So we have the motion and we have a

second. If -- let me -- let me ask if any are opposed to -- to approving the minutes?

ADVISORY COMMITTEE MEMBER SPIESS: This is Dan again. I do have a question on this. I don't want to be obstructive, but are we required to have a quorum to take actions, and this would lead to requested requests later in the meeting as well. Is there a quorum requirement?

CO-CHAIRPERSON McCURDY: My understanding is we do not have a quorum requirement.

ADVISORY COMMITTEE MEMBER SPIESS: Thank you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: This is Jessica. I am going to second the confirmation that Dr. McCurdy just stated, which is there is no quorum requirement for this Advisory Committee. Thank you.

CO-CHAIRPERSON McCURDY: Let me now ask if anybody wishes to abstain from voting on the minutes? And hearing silence, I will assume all are in favor. And so I will declare the minutes approved for submission. So, Jessica, I think I can turn it over to you as we move on to agenda item 3.

FFY 2020 PHHSBG Update

CO-CHAIRPERSON NÚÑEZ DE YBARRA: That's correct, everyone. This is, again, Jessica Núñez de Ybarra. And we are now on item number 3. I would like to provide an update, first, by saying that for fiscal -- federal fiscal year 2020, CDC has recently noticed -- notified us that the award amount will be \$10,738,724, for an increase of \$123,114 from the 2019 amount or award. This is an increase of ten percent from the current year. The planning process for funding California Department of Public Health program for fiscal year 2020 began in August of 2019. Please note the California Emergency Medical Services Authority, which receives about 30 percent of the California block grant award, after subcontracting the federal set-aside for rape prevention elements, has its own internal process for determining which programs will be funded each year. For California Department of Public Health, I'm happy to share with you that we have our Deputy Director Monica Morales who's going to give an overview to us of the process here at the Department. Monica.

DEPUTY DIRECTOR MORALES: Thank you, Jessica. So hi, everyone. I did neglect to give a little background on myself. So I'm Monica. I'm the Deputy Director over the Center for Healthy Communities, where we have our block grant housed. I've been in this position for about three years already. So we're pleased to see the magnificent work that takes place under the Department and in the Center.

And I'm going to go back for a little bit. For the past couple years since I've been here, there is a robust process that we use in the Department for the block grant dollars. This year, for example, we started our process in August through September, where programs had the ability that were interested to submit their proposals, the proposals went to our leadership under the Chronic Disease Branch for, you know, review, and they compile the documents including budgets, and the scopes of work. And then they put all those pieces together for our cohort of Deputy Directors in the Department and Assistant Deputy Directors. We have about -- this year, we had about a dozen individuals across our leadership team in the Department, they go

through an intensive review process. That process went from September to November. It was about -- about five meetings honestly, because we had three structured meetings and then we had two additional unstructured meetings to review the various proposals that came in. We had a criteria that we used under the block grant, which we need to take into account, if it meets the Healthy People 2030 goals, if it's embedded inequity promising evidence-based practices, and also the recommendation from ASTHO that I think you have outlined as one of your attachments. So under those considerations, we then met with our new Director, Dr. Sonia Angell, and basically walked her through the proposals that ranked the highest. After she provided some feedback, there was some -- the ability for folks to rewrite their proposals, strengthen them up, and then they went for final approval. So that's very much, in nutshell, the eight-month process that I've just shared with you that these proposals go through. So we really want to thank the individual that submitted the proposals. It was a very -- it is a very rigorous process, and -- but we do know that these dollars are important to us, specifically in trying to get them out to your communities. So there's a special attention to them because of that. So I think, with that Jessica, I would just outline that there was 22 programs that were funded for 2021, 14 of those are housed at CDPH, and seven of those programs are housed with EMSA. So I'm very pleased and thank you, everyone, for the great work in putting these proposals together. And I might have missed something, Jessica, so if there's anything you want to add.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: No, just that we -- and additional program at CDPH is our federal set-aside rape prevention program, so for a total of 15 programs that the Department of Public Health has. So thank you very much, Monica. I really appreciate your availability this morning. I know you are really busy right now and we appreciate your guidance and leadership. I want to also make the advisory committee aware that Monica is not just speaking as our Center Deputy Director, but she is a representative for all the Deputy Directors in the Department, including the Director. They have full faith in her leadership to be speaking with you today. So I really thank you for that, Monica, and we appreciate your support. That being said, I will now turn it to Amy to review with us all the programs.

PHHSBG PROGRAM SPECIALIST YAN: Good morning. This is Amy Yan, program specialist for the block grant. And I am going to be reviewing document D6. The descriptions for the program starts on page two. So I'll start with the -- can you guys hear me?

CO-CHAIRPERSON McCURDY: I can. Thank you.

PHHSBG PROGRAM SPECIALIST YAN: Okay. Great. Health Programs at Local Health Departments and Within CDPH. This program will support CDPH programs and local health departments to prepare for and prevent the health impacts of climate change. It will also support CDPH programs and local health departments to improve social determinants of health and meet -- and meet existing health program objectives through engagement with climate change policy and planning. The proposed allocation is \$619,002.

The next program is the California Behavioral Risk Factor Surveillance System Program. The BRFSS is a California specific surveillance system that surveys adults 18 years and older on self-reported health behaviors. Questions in the survey related to nutrition, physical activity, tobacco use, hypertension, blood cholesterol, alcohol use, inadequate preventative health

care, and other risk factors. An annual BRFSS report is published. Because the survey -- because the survey is conducted on an annual basis, the continuous use of this system allows analysis of trends over time. The proposed allocation is \$290,000.

The next program is the Cardio Disease Prevention Program, which supports a statewide cardiovascular disease alliance, Healthy Hearts California, which coordinates statewide heart disease control and prevention efforts. Proposed allocation is \$824,654.

The next program is EMS for Children. This program will implement fully institutionalized emergency medical services for children in California by continuing to incorporate statewide compliance with national performance measures -- hello -- and the collection of statewide data to develop a comprehensive model for the integration of family-centered care for children into California's EMS system. Proposed allocation is \$121,486.

The next program is the EMS Partnership for Injury Prevention and Public Education. This program will maintain continuous emergency medical services participation in statewide injury-prevention and public-education initiatives, programs, and policies by collaborating with local EMS agencies and stakeholders in the development and continued maintenance of EMS-related injury prevention strategies. Proposed allocation is \$93,557.

The next program is EMS Poison Control System. This program supports California's poison control system, one of the largest single providers of poison control services in the United States and the sole provider of poison control services for California. Proposed -- proposed allocation is \$94,856.

The next program is EMS Prehospital Data and Information Services and Quality Improvement Program. This program provides for prehospital EMS data submissions into the State EMS database system and unites the EMS system under a single data warehouse, fostering analyses on patient care outcomes, public health system services, and compliance with California State and federal EMS service laws. The program improves prehospital EMS services and public health systems statewide providing measurable quality improvement oversight, resources, and technical assistance. The proposed allocation is \$1,198,116.

The next program is EMS STEMI and Stroke Systems. The program reduces premature deaths and disabilities from heart disease and stroke through improved cardio--cardiovascular health detection and treatment during medical emergencies. Propose allocation is \$190,174.

The next program is the EMS Systems Planning --Planning and Development. This program provides statewide coordination and leadership for the planning, development, and implementation of local EMS systems. EMS systems Planning and Development Program conducts assessment of California's 33 local EMS systems in order to coordinate EMS activities based on community needs for the effective and efficient delivery of EMS systems. Proposed allocation is \$791,464.

The next program is the EMS Trauma Care Systems. This program reduces morbidity and mortality resulting from injury in California by providing continued oversight of the statewide Trauma System in accordance with the California Health and Safety Code and California Code of Regulations. Proposed allocation is \$196,384.

The next program is Office of Policy and Planning. This program builds cross-sectoral engagement in CDPH's State Health Assessment and State Health Improvement Plan by enhancing capacity to address crosscutting priorities defined by health -- public health through Comprehensive Assessment Integrated Planning and Collective Action addressing crosscutting priorities tie defined by public health with the purpose of organizing for impact. Proposed allocation is \$966,370.

The next program is Health in All Policies. This program facilitates the California Health in All Policies Task Force, provides consultation to non-health agencies to integrate health and equity into their policies, programs, and procedures, and builds CDPH and local health department capacity to promote health equity and implement Health in All Policies approaches through collaboration and integration of health and equity considerations statewide. Proposed allocation is \$592,748.

The next program is Healthy People 2020 Program. The program supports the overall efforts of the block grant by enhancing the accountability and transparency of the block grant through measuring progress and impact of funded programs through quality improvement initiatives, as well as communicating current accomplishments. Proposed allocation is \$882,923.

The next program is Injury Prevention Program. The -- this program seeks to maintain injury prevention and control as the core public health function and ensure flexibility and capacity to address emerging cross-sector issues, such as marijuana-impaired driving and poisoning. Proposed allocation is \$984,629.

The next program is the Public Health Accreditation Program. On December 9, 2014, the California Department of Public Health was awarded national accreditation by the Public Health Accreditation Board. To maintain the Department's accreditation status, this program will make accreditation-related technical assistance available to California's local and tribal public health agencies and oversee internal departmental efforts to maintain compliance with accreditation requirements. Proposed allocation is \$60,000.

The next program is Rape Prevention Program. This program approaches sexual violence from a public health perspective. Like California's smoking campaign that has made smoking unacceptable, it aims to change the behaviors and norms that make sexual violence tolerable by building the capacity of California's local rape crisis centers to implement sexual violence primary prevention strategy. Proposed allocation is \$832,969

The next program is Southern California Asylum Seeker Health Surveillance and Linkage to Care. This program is an active surveillance and rapid public health response program for individuals seeking asylum and intended to reside in California. Active surveillance increases early identification of infectious diseases of public health significance, and services facilitate linkage to health care services and disease control. Proposed allocation is \$236,000.

The next program is the Surveillance Sampling of Romaine Lettuce for E. coli O157 and Cyclospora. The goal of the program is to collect surveillance samples of high-risk food products that are known to be susceptible to microbial contamination, evaluate them for microbial contamination, and initiate interdiction efforts to remove them from the marketplace if

determined to be adulterated, thereby preventing consumer exposure and reducing the incidence of foodborne illnesses. Proposed allocation is \$200,000.

The next program is the Toxicological Outbreaks Program. This program supports the administrative and technical infrastructure at CDPH to conduct non-infectious toxicological disease outbreaks investigations. Proposed allocation is \$125,000.

The next program is the Tuberculosis Free California. This program promotes prevention strategies to produce -- reduce tuberculosis disease among high-risk populations in California through the most current evidence-based TB testing and treatment strategies, including screening all high risk non-U.S. born residents for TB infection and for those who test positive, ensuring treatment to prevent disease. Proposed allocation is \$600,000.

And the next program is Workforce Development Preventive Medicine Residency and California Epidemiological Investigation Service Fellowship. PMR and CalEIS programs are the key workforce pipeline for hard to fill epidemiology positions in California state and local health public health agencies. Trainees perform data and policy analyses, providing disease outbreak and emergency preparedness response, community needs assessments and planning, clinical preventative medicine, system quality improvement, et cetera. Proposed allocation is \$688,392.

And the last program is the Youth Obesity Prevention. This program fosters the development of healthy communities through the creation, adopt, and/or implementation of evidence-based policies, practices, and/or resources that support and advance community changes at both the State and local levels. Proposed allocation is \$150,000. Jessica back to you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, Amy. I really appreciate your thoughtful review as we aspire to provide. Next, I'm going to hand it back to Dr. McCurdy to continue on this agenda item.

CO-CHAIRPERSON McCURDY: Okay. Yes. And thank you, Amy, for that recap of those programs. We will -- I want to emphasize that we're going to be discussing the specific funding allocations in the next agenda item. At this point, I just want to ask the committee if there are any questions or discussions about the proposed programs listed in D6 for the 20-21 fiscal year -- state fiscal year, or if you have any questions for Monica about the program's selection process.

ADVISORY COMMITTEE MEMBER SPIESS: This is Dan Spiess. I'm just curious what your discussions were --

CO-CHAIRPERSON McCURDY: Yes.

ADVISORY COMMITTEE MEMBER SPIESS: -- regarding the programs -- regarding the programs and how they relate to the principles for allocation? Are you feeling comfortable that they meet the criteria for the principles of allocation?

CO-CHAIRPERSON McCURDY: I personally am, but I would want that, you know, question to be addressed by our Committee members. And since you've raised the question, I have to

ask, I mean, how do you feel about it? Before I do that, though, maybe what I should do here is defer to Jessica or perhaps Monica about the process itself. The criteria are listed in D5, document D as in David, 5. And there are -- there's a nice list of them there. So it, needless to say, it requires sort of a weighing of all those factors. So, Jessica, do you have any specific information or Monica that might help address this question?

PHHSBG COORDINATOR HORNE: Hello, everyone. This is Rebecca. Before Monica or Jessica jumps in, I do want to say since our team was involved in putting together the application for which all programs could use to apply for funding, that the principles of allocation was included in that four-page application, and programs were instructed to indicate or to what extent their proposals matched with these program allocations. And those -- that documentation was forwarded to the dozen or so Deputy Directors that Monica referred to as part of their discussion. So it certainly was built into the process. And if Jessica and Monica have anything to add, I'll turn it over to them at this point.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Hi. This is Jessica Núñez de Ybarra. I want to share with the advisory that Monica Morales only had a few minutes this morning due to being redirected to a different meeting. So I'm happy to say that we are, in the Department, required to comply with the documents, the principles for allocation. So those were very much used as a criteria for application in the administration. I hope that's helpful, Dan. And I also want to share with the Advisory Committee that we've kind of in this conversation moved to the Agenda Item number 4, so we do intend to speak to those items, but we can do it now. I'm not opposed to that.

ADVISORY COMMITTEE MEMBER SPIESS: Thank you for the description. I appreciate that.

CO-CHAIRPERSON McCURDY: I would also -- this is Stephen McCurdy again. I would also like to add that these criteria are reviewed periodically. And most recently, I believe, it was in September that they were reviewed and approved. But nevertheless, it's something that requires, I think, frequent revisiting. So any time anybody in the committee feels that we need to review those and reconsider them, the Committee and the Department are open to that. Okay. I would -- if there are no further questions from our Advisory Committee, I would like to open this up for public questions or comments about the programs or the selection process Hearing none. Why don't we now formally move on to Agenda Item number 4. And, Jessica, I'll bring it over to you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Did you want to give the public an opportunity to comment on Agenda Item 3. Any questions they may have?

CO-CHAIRPERSON McCURDY: Yes, I did and heard no comment. Yeah.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Okay. Great.

CO-CHAIRPERSON McCURDY: I did that and no comment came forward. But in case I didn't get it across, let's just do it again. Are there any comments from the public? I think we're good to move forward --

DR. BRUNNER: This is Wendel Brunner --

CO-CHAIRPERSON McCURDY: Oh, I'm sorry.

DR. BRUNNER: Oh, that's fine.

CO-CHAIRPERSON McCURDY: Yes, Wendel.

DR. BRUNNER: Briefly. This is my first experience with one of these advisory board meetings. So I'm probably unfamiliar with a lot of things in this question or comment made may miss the point. This is the Chronic Disease Prevention Block Grant, is that correct or no?

CO-CHAIRPERSON McCURDY: Rebecca -- or excuse me, Jessica, let me defer to you on this.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Hi. This Jessica Núñez de Ybarra. Again, this is the Advisory Committee for the Preventive Health and Health Services Block Grant.

DR. BRUNNER: Got it, Preventive Health and Health Services. I was struck. I mean all these programs seem very worthwhile, totally worthwhile. I was struck by how much is in EMS for basic sort of EMS services and also in communicable disease for basic communicable disease services. So that's the only thing I was struck by. It's like that any of these programs aren't worthwhile. They certainly are.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you, Dr. Brunner. Yeah, years ago in the Reagan Administration there were per capita funding from the federal government for the work of EMSA here in California and for work in the Department of Public Health. And those were converted to a block grant with funding that had been on a population basis for rape prevention.

So we historically had to put together an advisory for purposes of ensuring that this historic funding continued to be monitored because, at this point in time, California is only obligated to use these principles of allocation and have the advisory meet Healthy People 2020, now Healthy People 2030, objectives and criteria. And so it is a thoughtful process to do our best at the Department, as Monica said, to really bring leadership to the table and see dollars are comparative to some of our core work. So we appreciate the comments, Dr. Brunner. So Rebecca, did you want to add anything to my brief overview.

ADVISORY COMMITTEE MEMBER SPIESS: This is Dan. I might add and this goes back quite a few years, but it's my recollection that when the block grant money came into California, that there was a formula for the set-aside, I will call it, for rape prevention and emergency medical services. And those formulas are still being used to determine what the allocations are for those two programs.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Dan, you are --

ADVISORY COMMITTEE MEMBER SPIESS: Am I -- am I sort of close?

CO-CHAIRPERSON NÚÑEZ DE YBARRA: You are absolutely correct. We are that traditional oversight and divvying up our allocations calculations. I'm going to ask Rebecca Horne to

comment. I don't know Rebecca if you were on mute. Do you have anything to add?

PHHSBG COORDINATOR HORNE: No, I don't have anything to add. The allocation -- the award comes to us. There's a federal set-aside. And then after that, about 70 percent of the award is given to CDPH and about 30 percent is given to the Emergency Medical Services Authority.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Thank you. Dr. McCurdy -- unless, Dr. Brunner, you had any other questions?

DR. BRUNNER: No. Thank you very much. That's helpful. That explains why there's so much for EMS and that makes -- got it.

PHHSBG AC Discussion of FFY 2020 PHHSBG Allocations

CO-CHAIRPERSON McCURDY: Okay. Very good. This is Stephen McCurdy again. And actually, Dr. Brunner, your comment segues very nicely into our next agenda item, which is to open up our discussion for the actual allocations. And those we can see summarized both in the D6, but more briefly in the D7, David seven, document. So with that in mind, let me ask our Committee if there's any questions, or issues, or points of discussion?

ADVISORY COMMITTEE MEMBER SPIESS: Well, this is Dan again. In looking at the programs and those -- all of you were developing those, was there any - I don't know what the other word might be - controversy over what the programs and the allocations might be? Is there anything we ought to be mindful of as we look at the proposed programs?

CO-CHAIRPERSON NÚÑEZ DE YBARRA: This is Jessica --

CO-CHAIRPERSON McCURDY: Jessica, let me defer again to you.

CO-CHAIRPERSON NÚÑEZ DE YBARRA: Yea. This is Jessica. I would say that using the principles that we just reviewed and going through this new process, I want you all to be aware that the new Director, Sonia Angell, thoroughly vetted the whole listing and had conversations with all the directors. So I believe -- you know, she was very clear in her interest in funding the programs that were impactful to the population. She understands the funds are rare and are very valuable to the Department. And so I would say there's no controversy. She was very clear in conversations with Deputy Doctor's programs with this being her final proposed and the Department's proposed programs. And I can only speak for our side. I can't speak for the Emergency Management Services Authority side, but know that they also totally vetted the listing and felt good about what was submitted. It has -- and was sanctioned by EMSA.

ADVISORY COMMITTEE MEMBER SPIESS: Thank you.

CO-CHAIRPERSON McCURDY: Are there any other comments or discussion from the Advisory Committee members? So hearing none, I would now like to open up for comments and discussion from members of the public who are attending? So hearing none, let me note that the Advisory Committee and CDPH has done -- have done our due diligence to discuss these allocations and with the expectation of finalizing them today. But before we take a vote

on the allocations, we would like to note for the record that since we serve as an advisory body to the PHHS Block Grant for California, in the event that any unanticipated changes are needed to the individual program allocations, we acknowledge and defer to CDPH in allow that those changes be made that -- and that such changes would not require an additional meeting for approval. So I would like to move then on to our action item, which is to approve those funding allocations. I'd like to ask for a motion for approval.

ADVISORY COMMITTEE MEMBER SPIESS: I'll make that a motion -- that emotion.

(Laughter.)

ADVISORY COMMITTEE MEMBER SPIESS: I'll will make that motion. This is Dan Spiess.

CO-CHAIRPERSON McCURDY: And identify, please?

ADVISORY COMMITTEE MEMBER SPIESS: Dan Spiess.

CO-CHAIRPERSON McCURDY: Dan Spiess. Thank you.

ADVISORY COMMITTEE MEMBER SPIESS: Dan Spiess.

CO-CHAIRPERSON McCURDY: Okay. Thank you, Dan. Yeah. Thank you. And can we have a second?

ADVISORY COMMITTEE MEMBER ADAMS: Yes. This is Christy Adams. I second that motion.

CO-CHAIRPERSON McCURDY: Christy Adams seconds the motion. Okay. Is anyone opposed to approving these fund allocations? Is anyone abstaining from voting for these funding allocations? Then I will assume all are in favor and we will count them as unanimously approved. So do we have any further follow-up questions from the advisory committee?

ADVISORY COMMITTEE MEMBER SPIESS: Just -- this is Dan again, just to thank you for all the work that you've put in on this. I really appreciate it.

Adjourn

CO-CHAIRPERSON McCURDY: Thank you very much. And especially, I mean, that should be directed, of course, towards CDPH folks who have put in a huge amount of time, effort, and all into this. I'd like now to open up for any -- open up the floor for any remaining questions from the public? Okay. And hearing none, let me again ask for a motion to adjourn.

ADVISORY COMMITTEE MEMBER SPIESS: I guess no one wants to leave. I'll make a motion to adjourn.

(Laughter.)

CO-CHAIRPERSON McCURDY: Okay. Thank you, Dan Spiess, for a motion to adjourn. And now can we get a second?

ADVISORY COMMITTEE MEMBER ADAMS: This Christy Adams. I'll second.

CO-CHAIRPERSON McCURDY: Christy, thank you very much for the second. Is anybody opposed to adjourning? Hearing none. Is anyone abstaining from this vote on adjournment? Again, hearing none. I will assume that all are in favor unanimously for adjourning. So thank you all very much for your include and preparation for this meeting and we are now adjourned.

(Thereupon the PHHSBG meeting adjourned at 11:01 a.m.)

CERTIFICATE OF THE REPORTER

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 PHHSBG meeting was reported in shorthand by me, James F. Peters, a Certified Shorthand Reporter of the State of California.

That the said proceedings was taken before me, in shorthand writing, 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 6th day of May, 2020.

JAMES F. PETERS, CSR

Certified Shorthand Reporter

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