JEFFERSON COUNTY BOARD OF HEALTH

Wednesday, January 11, 2017 - 5:00 p.m.
5th Floor Board Room

PRESENT: Max Michael, III, M.D., Joshua Miller, D.O., Yocunda Clayton, M.D.,
Hernando Carter, M.D., and Sylvie Stacy, M.D.

ABSENT: Commissioner Jimmie Stephens

OTHERS PRESENT: Mark Wilson, M.D., David Hicks, D.O., Senitra Blackburn, Kim Cason,
Kachina Kudroff, David Maxey, Esq., Haley Lewis, Esq., Bryn Manzella,
Turner Overton, M.D., Xuan-dao Thi Pham, M.D., Jonathan Stanton, and
Denisa Pridmore

Call to Order
The meeting was called to order by Dr. Michael, Chair. Dr Michael introduced Sylvie Stacy,
M.D. and welcomed her to the Board of Health.

Minutes
Minutes of the December 14, 2016 meeting were approved as distributed.

Pre-Exposure Prophylaxis (PrEP)
Dr. Wilson reminded the Board that the 2017-2021 JCDH Strategic Plan includes HIV
prevention and management measures. Jefferson County continues to have inadequate
prevention and care for individuals with HIV. JCDH is preparing to start a PrEP clinic in
2017 to help address some of these issues.

Kachina Kudroff, MPH, CHES, Program Manager with UAB, Department of Medicine, gave
an overview of the Pre-Exposure Prophylaxis (PrEP) Clinic at UAB 1917 Outpatient Clinic.
PrEP is a strategy that involves use of antiretroviral medications (ARVs) to reduce the risk of
HIV infection via sexual exposure.

Turner Overton, M.D., was able to join the meeting briefly and extended an invitation to
JCDH providers to observe in their clinic.

Financial Statement
Dr. Wilson noted the December 2016 Financial Report was in the board packages for their
review and asked if anyone had questions. Mr. Holmes was unable to attend the Board
meeting. A motion to accept the financial report was made, seconded and approved.
Contracts
On the motion of Dr. Miller, and seconded by Dr. Clayton, the following contracts were approved:

A new contract with Jefferson-Blount-St. Clair (JBS) Mental Health Authority/Urgent Care Clinic to provide educational affiliation agreement to educate and train Certified Registered Nurse Practitioners employed by JCDH, with no funds exchanged, from December 31, 2016 through December 31, 2019.

An amendment to a contract with the Alabama Department of Public Health (payor) to extend the date an additional three months to pay salary, fringe benefits, mileage and other travel expenses for full-time nurse to serve as the Area Immunization Manager at an additional rate not to exceed $42,035 from December 28, 2016 through March 31, 2017.

Renewal of a contract with the Alabama Department of Public Health (payor) to support efforts to plan, develop, and maintain a public health infrastructure that helps assure immunization coverage levels and low incidence of vaccine-preventable diseases at a rate not to exceed $353,275 from October 1, 2016 through March 31, 2017.

A new contract with United Way of Central Alabama (payor) whereby JCDH will provide support for the “Smoking Cessation Access in Public Housing” project at a rate not to exceed $6,100 from January 1, 2017 through January 1, 2018.

Reducing the Burden of Disease Related to Early Initiation of Tobacco Use through Increasing the Legal Age of Tobacco Purchase to 21 Years
Dr. Wilson stated that Bryn Manzella had put together the following resolution for the Board’s consideration. Dr. Wilson said the Board’s endorsement of this resolution would help support his work with the Alabama legislators or local communities. The Board discussed the benefits that would be provided with this restriction.

On the motion of Dr. Miller, and seconded by Dr. Clayton, the following resolution was approved:

WHEREAS, Smoking is the leading cause of preventable death in the United States and responsible for 20% of the country’s deaths (1-2);

WHEREAS, thirty percent of the 4,700 persons in the United States under the age of 21 who smoke their first cigarette today will become daily smokers, and one-third to one-half of daily smokers will die from a disease related to smoking (3);

WHEREAS, early smoking initiation is linked to higher rates of nicotine addiction and increasing challenges in later attempts at smoking cessation (4-5);

WHEREAS, Jefferson County and Alabama rates of high-school age and adult smoking remain above national averages (6);
WHEREAS, Tobacco usage is significant among Alabama’s 9th to 12th graders with 35.5% using tobacco in the 30 days prior to survey and with 14.0% smoking cigarettes daily (7);

WHEREAS, Jefferson County, Alabama’s 2012 infant mortality rate, 9.6 per 1,000 live births, was substantially higher than the national rate of 6.14 deaths per 1,000 live births (8), and whereas 5.3%-7.7% of preterm births, a significant cause of infant mortality, and 23.2%-33.6% of Sudden Infant Death Syndrome (SIDS) deaths are attributable to maternal smoking (8-9);

WHEREAS, previous efforts to limit access of minors to tobacco through the restriction of tobacco sales to minors have reduced tobacco use prevalence in this population (10);

WHEREAS, the legal age for purchasing tobacco products in Alabama is currently 19 despite widespread support for raising the minimum age for purchasing tobacco to age 21 among smokers and non-smokers, different regions of the country, and different political parties (11-14);

WHEREAS, Eighty-one percent of adult smokers began smoking before the age 21, more than 50% of current adult smokers were regularly smoking before the age 18, and individuals between the ages of 18 and 20 are a major supplier of cigarettes to adolescents (15, 16);

WHEREAS, the National Academy of Medicine’s (formerly the Institute of Medicine) 2015 study stated that raising the minimum legal age for purchase of tobacco products to 21 will create significant public health benefits including:

- Decreasing smoking-related deaths by 10%, and preventing 223,000 premature among individuals born between 2000 and 2019;
- Reducing overall smoking prevalence by 12%;
- Decreasing the smoking rates for 15-17 year olds by 25% and by 15% among 18-20 year olds;
- Delaying initiation of smoking among individuals less than 21 years of age;
- Reducing the number of pre-term births by 286,000 and low-birthweights by 438,000;
- Reducing healthcare costs associated with tobacco use and increasing length and quality of life (15, 17-18).

WHEREAS, the American Academy of Pediatrics “strongly recommends the minimum age to purchase tobacco products, including e-cigarettes, be increased to age 21” nationally (19);

WHEREAS, “Tobacco 21” laws are a tool to reduce access by youth to tobacco products by prohibiting the sale of tobacco products to individuals less than 21 years of age (20);

WHEREAS, the American Lung Association launched “Tobacco 21” on August 30, 2016 recommending Alabama and the remaining 47 states and District of Columbia join Hawaii and California in raising the legal sale age for tobacco to 21 (15);

WHEREAS, as of December 2, 2016, over 200 cities and two states have adopted “Tobacco 21” laws (12);
WHEREAS, a multivariate analysis of the impact of raising the legal age for the purchase of tobacco in Needham, Massachusetts, the first city in the country to adopt such a law, to age 21 revealed a 47% reduction in the rate of smoking among high school students (21);

WHEREAS, a study published in 2014 by the American Journal of Public Health found increasing the minimum age of cigarette purchase to 21 would result in only a 2% immediate loss in total cigarette sales in the United States (22-23);

WHEREAS, several studies reveal healthcare cost savings from raising the minimum legal age for tobacco purchase to 21 exceeds the resulting loss of revenue from tobacco sales taxes (24 -27);

BE IT RESOLVED that the Jefferson County Board of Health Endorses:

1) The development of draft legislation and policies to prohibit the sale of tobacco or nicotine products* to persons under the age of 21 years.

2) Advocacy efforts by the Health Officer for local or state-wide adoption of measures to make illegal the sale of tobacco or nicotine products* to persons under the age of 21 years.

3) Utilization of Jefferson County Department of Health resources, financial and human, to educate county residents, policy makers and healthcare professionals about the health benefits of making the sale of tobacco or nicotine products* to persons less than 21 years of age illegal.

* Excludes products approved by the Food and Drug Administration for use in tobacco cessation.

Max Michael, III, MD, Chair
Jefferson County Board of Health

References


Board’s Self-Evaluation Summary
Bryn Manzella, MPH, Director of Quality Improvement, thanked the Board for completing the annual survey. There was 100 percent participation. The survey was based on a 7 point scale with an overall mean score of 6.69 or 96 percent. This year showed an improvement from 94 percent the previous year. Ms. Manzella briefly discussed two items for improvement from the Section II. Board Orientation, Structure and Function area.

Health Officer Report

Nurse Family Partnership
Dr. Wilson reported a meeting was held in December with the Community Foundation of Greater Birmingham and other local partners to help identify additional funding for the Nurse Family Partnership. The target date to begin the program is summer of 2017.

Resource Center of Jefferson County
Dr. Wilson noted another area making progress from the 2017-2021 JCDH Strategic Plan is the Resource Center for people with drug addiction in Jefferson County. The Crisis Center has shown an interest in running the center. A meeting with local substance abuse treatment programs indicated they would be willing to contribute substance abuse counselors to work at the center. A meeting of the Board of Directors for the Crisis Center is scheduled next week and Dr. Wilson plans to attend. He will be asking for their approval of the Crisis Center expanding their scope of service to include running the Resource Center, as well as providing on call services for it.

Needle Exchange
Dr. Wilson gave an update on the resolution the Board approved in support of needle exchange. He has spoken with some legislators for their advice on how to navigate this through the legislature. We are still working on obtaining a legislative sponsor. A draft bill has been sent to the ADPH legal counsel since most of the oversight and monitoring would occur through their office.

Governor’s Task Force Update
Dr. Wilson noted that he was selected to serve on Governor Robert Bentley’s Alabama Council for Opioid Misuse and Addiction Task Force that was mentioned at last month’s meeting. The first meeting is on January 24, 2017.
**Child Health Medical Director**
Dr. Wilson reported the interview process has concluded for the Child Health Medical Director and Dr. Khalilah Brown was selected.

**Health Action Partnership Grant**
Dr. Wilson stated a small grant was awarded to the Health Action Partnership for community and partner engagement focused on reducing uncontrolled blood pressure in the 35211 zip code area of Jefferson County.

**Coordinated Health Care**
Dr. Wilson reported that he has met with Commissioner Jimmie Stephens to discuss coordinating indigent health care in Jefferson County. One idea is to convene people in the business of caring for the uninsured and under-served to share what everyone is doing. Dr. Michael stated if the Affordable Care Act goes away, it would be important to have conversations about the potential rise in uninsured people and access to care.

The next Board of Health meeting is scheduled for Wednesday, February 8, 2017 at 5:00 p.m. in the Fifth Floor Board Room. There being no further business, the meeting adjourned at 6:00 p.m.

[Signature]
Sylvie Stacy, M.D., Secretary

Approved:

[Signature]
Max Michael, III, M.D., Chair