

ALLEGHENY COUNTY BOARD OF HEALTH

MINUTES

July 17, 2019

Present: Lee Harrison, MD, Chair
William Youngblood, Vice Chair
Karen Hacker, MD, Secretary
Anthony Ferraro
Ellen Stewart, MD
Edith Shapira, MD
Donald Burke, MD
Caroline Mitchell
Joylette Portlock, PhD

Absent: Kotayya Kondaveeti, MD

1. **Call to Order**

The meeting was held in the Gold Room of the Allegheny County Courthouse. Dr. Harrison called the meeting to order and announced that an executive session was held to discuss litigation and personnel matters. Dr. Harrison stated that a day that the Board had hoped would never happen had arrived: Dr. Hacker's final Board meeting. He stated that the Board was very appreciative of Dr. Hacker and her successes. He noted that she will be assuming an important job with the CDC, and that the Board is proud of her.

Dr. Stewart expressed her appreciation for Dr. Hacker and her transformative effect on ACHD. She noted that ACHD went from a challenged state to a nationally accredited health department under Dr. Hacker's tenure.

Dr. Portlock applauded Live Well Allegheny, which she described as Dr. Hacker's signature program. She also noted Dr. Hacker's attention to environmental issues. She stated that Dr. Hacker will be missed and that the last six years were extraordinary.

2. **Approval of Minutes from May 6, 2019**

Dr. Harrison asked if there were any comments or questions about the minutes. There were none.

Action: Mr. Youngblood moved to approve the minutes, Dr. Stewart seconded the motion.

Motion passed unanimously.

3. **Public Comments on Agenda Items**

There were no public comments on agenda items.

4. **Old Business**

A. Environmental Health Programs Enforcement Update

Jim Kelly, ACHD Deputy Director for Environmental Health, provided an update to the Board on his bureau's enforcement actions. He stated that there is an increase in Housing penalties, due to an increased diligence regarding enforcement and penalties within that program. He stated that the Plumbing Program has been quiet.

The Food Program is steady compared to 2018, though alerts and closures have increased. Mr. Kelly ascribed this to many food facilities being opened by people without a lot of experience in the food industry. He stated that this takes up a lot of time for the Food Program.

The Water Pollution Control Program has a decreased number of complaints this year, but has issued more notices of violations. The ALCOSAN consent order is still with the Department of Justice. Mr. Kelly stated that a meeting with the EPA is scheduled in September, followed by meeting with municipalities. He stated that the consent order will be subject to a public comment period.

Regarding the Air Quality Program, Mr. Kelly stated that complainants need to focus on ACHD's complaints process. That is how ACHD is able to respond to the complaints. He noted that complaints to SmellPGH provides ACHD with data after the fact.

Regarding open enforcement cases, Mr. Kelly stated that the Churchill case is scheduled for Commonwealth Court in September; 55 new complaints have been received over the last six months regarding Metalico, a new Notice Of Violations is drafted, and ACHD is working with DEP; and a settlement agreement has been signed with US Steel. Mr. Kelly noted that the US Steel settlement agreement is subject to a public comment period, and Mr. Kelly stated that ACHD is looking for significant input on the community benefit trust that is part of the settlement. Mr. Kelly further noted that this settlement does not cover the fires of December 2018 and June 2019, those enforcement actions remain open.

Mr. Ferraro asked Mr. Kelly if a manual existed for how to open a restaurant. Mr. Kelly stated that ACHD does have a lot of information available online, and the Food Safety Program can mail packets to interested parties. Dr. Hacker stated that proprietors can also meet with ACHD prior to opening their establishment. Dr. Harrison asked how well-known these options are. Mr. Kelly stated that it is not posted on our website. Mr. Ferraro suggested making available a packet of information approved by the Food Safety Committee.

At this time, Dr. Harrison recognized Allegheny County Councilperson Sue Means and thanked her for attending.

B. Live Well Allegheny Update

Dr. Hacker stated that Live Well Allegheny now has 67 municipalities as members, the newest of which are Richland, Edgeworth, and Verona. She thanked ACHD's Hannah Hardy for her work regarding Live Well. She stated that there is currently an RFP process open to grassroots organizations in targeted communities for the community health fund. The deadline for applications is July 22nd. She noted that the Summer Food Program is underway. She also stated that ACHD is also beginning the process to create an ACHD District Office to serve the Mon Valley.

5. **New Business**

A. Introduction of Ronald Sugar as Acting Director and Dr. Kristen Mertz as Medical Director

Dr. Hacker thanked the Board for their comments about her. She introduced Ronald Sugar as the Acting Director and Dr. Kristen Mertz as the Medical Director. She stated that Mr. Sugar has been a Deputy Director for almost five years, is a strong leader, and has excellent knowledge about the Health Department. She stated that Dr. Mertz has been appointed as the Medical Director since Mr. Sugar is not a Medical Doctor.

Dr. Shapira stated that she is a co-chair, alongside Grant Oliphant, of a nine-member search committee to identify ACHD's next Director. She stated that a national search firm has been hired, a position description has been written, and input is being gathered from community leaders. She hopes to identify semi-finalists in September and to hire the next Director in November.

B. Asthma Task Force

Dr. Hacker informed the Board that the Task Force has collected asthma data and engaged in root-cause analysis. She stated that 12% of children, and 10% of adults, in Allegheny County have asthma. The prevalence of asthma is almost twice as high amongst black adults in Allegheny County, compared to whites. The number of Emergency Department visits for asthma is also significantly higher for black residents than for whites. Dr. Hacker stated that the Task Force was created from the Plan for a Healthier Allegheny's Maternal and Child Health priority area. She informed the Board that ACHD is working with ESPnet to get EHR data from AHN and UPMC, which will be better than claims data.

Dr. LuAnn Brink, ACHD's Chief Epidemiologist, stated that 19% of children aged 0-4 had at least Emergency Department visit for asthma, based off of claims data. She stated that the overall prevalence of asthma is lower among children aged 0-4, but the service utilization is much higher among this age group. Dr. Brink also noted that even though prevalence is similar by insurance type, service utilization is much higher among Medicaid members.

Dr. Hacker stated that current interventions focused on housing, such as the Safe and Healthy Homes initiative; clinical interventions like those performed by Children's Hospital of Pittsburgh and Duquesne University's school-based interventions; and educational interventions like those performed by Women for a Health Environment. Proposed future interventions include an asthma registry, and EXHALE (Education on asthma self-management, X-tinguishing smoking and secondhand smoke, Home visits for trigger reduction and self-management education, Achievement of guidelines-based medical management, Linkages and coordination of care, Environmental policies or best practices to reduce asthma triggers). The next steps for the Asthma Task Force include expanding interventions, particularly to the highest-need communities; developing a report with recommendations; tracking the status of ongoing, and proposed, interventions; and collecting 2018 (year two) claims data and incorporating that data with surveillance activities.

Dr. Portlock noted the striking disparities and asked which issues were at play. Dr. Hacker stated that there is historically a racial disparity and noted that using community champions may help. She stated that ACHD is trying to understand health access issues in the Mon Valley. She pointed out that there is a stigma around Medicaid.

C. Community Health Assessment Process and Survey

Dr. Hacker reminded the Board that ACHD last conducted a Community Health Assessment in 2014-2015. She stated that ACHD is required to conduct one every five years, thus the time has come for ACHD to begin its next CHA. She stated that the first component of the CHA is a community survey. ACHD released its survey a week and a half ago, in both paper and online formats. Paper copies of the survey were provided to partner organizations for distribution to the communities that they serve. Dr. Hacker stated that more than five thousand paper copies of the survey were distributed to 21 partners. Paper copies of the survey are available at all ACHD clinics and also at all public libraries. As of today, ACHD has received 963 completed online surveys and 70 completed paper surveys. Dr. Hacker further stated that the survey is available in multiple languages. She stated that the next step, after the survey period ends, will be to conduct focus groups.

Dr. Burke asked how ACHD will account for sampling. Dr. Brink stated that ACHD attempted to over-sample more vulnerable populations and that a progress check will be conducted halfway through the survey period. Dr. Burke asked if survey results will be able to be compared to other jurisdictions. Dr. Brink stated that would not be possible. Dr. Hacker explained that the questions are atypical and unique. She stated that ACHD modelled its survey questions off of Louisville, Kentucky's survey. Dr. Burke expressed discomfort with ACHD's chosen strategy. Dr. Hacker stated that the community survey is not the sole source of data for the CHA, and reminded Dr. Burke that the BRFSS was also conducted and data from that survey will also be incorporated into the CHA.

D. Permitting Fee Changes

Jayne Graham, ACHD Air Quality Program Manager, stated that this request is for approval of a public comment period for fee changes. Ms. Graham presented the Board with the proposed changes to the fees for Air Quality program services and explained that the motivation for changing the fees was to have the fees reflect the cost to ACHD to perform the relevant service. Mr. Kelly stated that the Clean Air Act was based on emission fees but noted that Air Quality programs have become a 'victim of their own success'. Mr. Kelly explained his meaning by stating that Air Quality programs must still monitor the same number of sources, but that those sources are producing fewer emissions, and the regulations have become more complicated.

Mr. Ferraro asked how much was collected for the Cheswick power plant. Ms. Graham stated that was about \$1,500. Dr. Harrison asked for clarification on what Ms. Graham was requesting a vote for. Ms. Graham replied that she was requesting a public comment period on regulatory changes for air quality permitting fees. Dr. Burke asked if the funds go to the Clean Air Fund. Ms. Graham stated that some of the funds go to the Air Quality Fund. Others go to the Air Pollution Control Fund. She stated that only penalty monies go to the Clean Air Fund. Dr. Hacker clarified that the Air Quality program has a number of funds, and that those funds are used to fund the program. She noted that as emissions decrease, the amount of money that those funds receive decreases. Mr. Kelly stated that the Air Quality program is now running in the red, and that it is spending more money than it takes in.

Action: Dr. Shapira moved to approve the public comment period for the Permitting Fee Changes, Dr. Burke seconded the motion.

Motion passed unanimously.

E. Environmental Health Fund Request: \$1,566.90 to support the Housing Program

Mr. Kelly stated that this request is for the purchase of several International Code Council (ICC) Code books. These books are used for educational purposes, reference documents, and support for enforcement actions taken under Article VI, Houses and Community Environment. He stated that these code books are published every three years and most are incorporated into the Pennsylvania Uniform Construction Code. It is important for Housing program staff to have access to these codes to support enforcement actions taken, as well as for use as reference material to better understand the rationale behind the code requirements.

Action: Mr. Ferraro moved to approve the EHF request for \$1,566.90, Mr. Youngblood seconded the motion.

Motion passed unanimously.

F. Food Safety Fund Request: \$900 for Training

Mr. Kelly requested \$1,000 for two individuals to be trained over three days in current national food safety applications.

Action: Mr. Ferraro moved to approve the Food Safety Fund request for \$1,000, Dr. Stewart seconded the motion.

Motion passed unanimously.

G. Clean Air Fund Request: \$90,000 for County Parks Tree Planting

Mr. Kelly stated that this request is to fund the Allegheny County Department of Parks for the purchase of 360 landscape trees, which will be planted at designated locations in the County's Parks over a two-year period. The Department of Parks will plant and maintain all 360 trees. Mr. Kelly noted that a study conducted by Tree Pittsburgh in 2018 found that tree canopy in our region is suffering. Over the past several years, the tree population in our Parks has been negatively affected by invasive species. The emerald ash borer killed 99% of the ash trees in our Parks and will eventually eliminate our remaining ash trees. Similarly, oak wilt fungus, woolly adelgid, spotted lanternfly and the Asian longhorned beetle have caused considerable damage, and may impose further harm, leading to additional canopy loss. Replacement of these valuable, mature trees is of vital importance to the air quality of Allegheny County's Parks.

Mr. Youngblood stated that this seems like a lot of money for trees. He asked if a report was included for proposed planting locations. Dr. Harrison stated that this information was in the application.

Action: Dr. Shapira moved to approve the CAF request for \$90,000, Mr. Youngblood seconded the motion.

Motion passed unanimously.

H. Clean Air Fund Request: \$300,000 for Asthma Registry

Mr. Kelly was joined by Dr. Liz Miller and Dr. Sally Wenzel in presenting this request to the Board. The trio stated that this collaborative proposal involving ACHD, UPMC Children's Hospital of Pittsburgh (CHP), and Pitt Public Health (PPH) aims to develop an asthma registry for children and adolescents for surveillance and management of asthma in our county. Asthma rates are higher than state average and vary significantly by neighborhoods throughout Allegheny County. Asthma admissions at Children's Hospital of Pittsburgh (CHP) account for 10% of all hospitalizations and have not declined in recent years despite nationwide improvements in asthma outcomes. This application expands on a clinical asthma dashboard developed at CHP along with the Asthma Institute Registry at PPH to develop a Children's Community Asthma Registry to enhance clinical care, educational outreach, relate environmental influences (indoor/outdoor air, pollens) to asthma outcomes, and improve tailoring of interventions.

The trio explained that as this registry grows, asthma patients could be monitored for their disease activity over time and by location. Providers could better understand the environmental factors impacting their patients. Patient's symptoms and medication use could be tracked to identify locations or times when rescue/reliever medication use is highest. Additionally, the registry could be combined with the PPH adult asthma registry to provide even

more granular surveillance and guide tailored interventions. This would build on the “Louisville” Model (Barrett et al. Health Affairs, 2018) which demonstrated an overall 82% reduction in rescue inhaler use in an asthma population by identifying environmental air quality triggers and implementing targeted interventions. Data generated from collaborations such as these would enable better understanding of local environmental challenges (close proximity to point source pollution, near major roadways, poor housing, etc.) as well as potential “in home” related challenges to asthma management. This information could then be used to design “precision” environmental interventions tailored to each child with asthma and their family.

Action: Dr. Shapira moved to approve the CAF request for \$300,000, Dr. Stewart seconded the motion. Dr. Burke abstained from voting on the motion.

Motion passed unanimously.

6. **Director’s Report**

Dr. Hacker shared her parting thoughts with the Board during her final Director’s Report. She stated that ACHD now has a good foundation to build on, and that the Board and Department must decide on how to build on that existing foundation and continue positive momentum. She stated that she can not emphasize enough the importance of geographic inequalities. She stated that address geographic inequalities will necessitate working across sectors and advised that ACHD should continue its role as a neutral convener.

Regarding environmental justice, Dr. Hacker noted that this region does suffer from legacy pollution. She stated that Allegheny County has suffered from decades of pollution. She encouraged continuing progress on this front with meaningful action. Dr. Hacker urged that attention be paid to climate change. She noted that Allegheny County is already seeing the effects of climate change and she used mold, flooded roads, and the spread of vector-borne illnesses as examples. Regarding chronic diseases, she stated that the smoking rate is too high. She noted that this is a jurisdictional issue, and she urged pressuring the State to increase taxes on tobacco products and decrease the number of exemptions to the Clean Indoor Air Act. She also urged adoption of Health In All Policies in order to address the Social Determinants Of Health.

Dr. Hacker ended her final Director’s Report by stating that she has full confidence in ACHD’s staff, and in the Board. She ended her tenure as ACHD’s Director by thanking everyone.

7. **Announcements**

There were no announcements.

8. **Public Comments on Non-Agenda Items**

A. Sharon Matrazzo, re: Prevention Point Pittsburgh’s Location

Ms. Matrazzo was not present to offer her comments.

B. Helen Matusick, Prevention Point Pittsburgh re: Prevention Point Pittsburgh's Location

Ms. Matusick was not present to offer her comments.

C. John Detwiler, re: Air Quality

Mr. Detwiler stated that it was difficult for him to hear more about dogs and cats during the discussion about asthma instead of hearing about Clairton. He stated that the people have been asked to accept failure, in terms of air quality, as a result of ACHD's agreement with US Steel. He stated that this agreement was a surrender on behalf of ACHD. He stated that ACHD needs to get serious with US Steel and stated that a slush fund will force municipalities to play ball with US Steel.

D. Mark Dixon, re: Dr. Hacker's Legacy

Mr. Dixon thanked Dr. Hacker for her service to the community in difficult circumstances. He stated that the community was pushing ACHD for change, and ACHD previously pushed back against the community. He stated that the community and ACHD were at odds. He stated that the pivot point for changing that relationship was during the Senate hearings in Clairton when ACHD pushed elected officials for more power. Mr. Dixon stated that Dr. Hacker's legacy in Allegheny County will depend if helping to amplify the community's demands becomes a pattern for ACHD.

E. Fred Bickerton, re: Invenergy Air Quality

Mr. Bickerton asked how ACHD can justify the installation of a new gas generator in southern Allegheny County. He asked if ACHD has assurances that Invenergy won't cause further deterioration of air quality. He stated that he believes that the model used for Invenergy's permit application is flawed. He urged ACHD to stop the installation of this.

F. Kurt Barshick, US Steel re: US Steel Clairton Air Quality Update

Mr. Barshick extended an invitation to the Board and to Mr. Sugar to tour US Steel's facilities. He stated that ACHD and US Steel worked together in 2016 regarding a consent judgment. Since then, US Steel has certified compliance on all ten batteries. He stated that the Liberty monitor recorded the lowest level of PM2.5 in 2018. He stated that US Steel has met the requirements of June 2018's order in both quarters of 2019. He stated that he anticipates further improvements brought about by a \$200 million investment. He stated that the agreement with ACHD fairly resolves the issues; secures the plants' future in the Mon Valley; and is positive for the community, the environment, and the economy.

9. **Adjournment**

Dr. Stewart moved to adjourn the meeting, Dr. Burke seconded the adjournment.