# California Public Health/Prevention Medical Leadership Forum <br> 23rd Conference Call Meeting <br> Tuesday, July 9, 2019, 8:15-9:30 am PT <br> MINUTES 

Call in: (515) 604-9094 Access Code: 457-029-043\#
"Handouts" other than this agenda and last meeting's minutes were online and linked below.

1. Roll Call by Institution, with Introduction of Guests

CAPM: Mark Horton (Chair), Ron Hattis (Secretary), Susan Bradshaw
CDPH: Gill Chavez, Aimee Sisson
DHCS: Karen Mark
UC Davis: Patrick Romano
Presenters: Nicole Kravitz, Rocco Pallin
UC San Francisco: George Rutherford
Stanford: Eleanor Levin
Calif. University of Science and Medicine, School of Osteopathic Medicine (Clovis): Lisa Chun
UC San Diego: Margaret Ryan
UC Berkeley School of Public Health: Michael Lu

## 2. Minutes of March 19, 2019 Meeting

There were no additions or corrections.

## Action: Approved

## 3. California Department of Public Health: Gil Chavez and Aimee Sisson

Aimee Sisson reported that Karen Smith left the department on 07/1/19. Susan Fanelli is the Acting Director, and Charity Dean is the Acting State Health Officer. Mark Horton commended Karen Smith for her outstanding service directing CDPH during the Brown Administration. Gil Chavez later joined the call and said he had been asked by Susan Fanelli to represent the department on this Forum. See also item 6 below.

## 4. Department of Health Care Services: Karen Mark

A re-organization began July 1. Mental health and substance abuse divisions will be integrated within Behavioral Health, rather than existing as separate divisions. The Value Based Payment Program will provide incentive payments to clinicians who meet certain quality standards.

## 5. Reports from Any Members Who Will be Leaving the Call Early

Lisa Chun reported that the College of Osteopathic Medicine is expecting its building to be completed by December 2019. Student applications for the first class will be welcomed starting in September. Ron Hattis asked whether the planned curriculum will emphasize prevention, and Lisa said yes, and noted that several faculty members have MPH degrees.

## 6. Final Changes to Public Health Provisions in Gov. Newsom's State Budget

http://www.capradio.org/articles/2019/06/09/california-budget-moves-toward-final-votes-with-new-spending-on-health-care-and-preschool/

CDPH: Aimee Sisson reported that there have been a number of increments. Within her Chronic Disease division money was added for farmworker health, sickle cell disease, and Alzheimer's disease.

Gil Chavez joined the call later and said that he did not have a comprehensive list of augmentations for CDPH, but in his area of Infectious Diseases, the following were added (list supplemented by post-meeting emailed information as he offered during the meeting):

- $\$ 5$ million ongoing allocation for HIV prevention, $90 \%$ of which is to be allocated to local jurisdictions
- $\$ 5$ similarly allocated on an ongoing basis to hepatitis C activities, $90 \%$ of which is to be allocated locally
- $\$ 2$ million one-time allocation for expenditures by San Francisco and Oakland for the 2022 $23^{\text {rd }}$ International AIDS Conference
- $\$ 2$ million one-time allocation to Valley Fever Institute at Kern Medical Center, for research
- $\$ 40$ million one-time allocation for infectious disease control, including $\$ 35 \mathrm{~m}$ for local jurisdictions, $\$ 1 \mathrm{~m}$ for tribes, and $\$ 4 \mathrm{~m}$ to DCPH
- $\$ 7$ million ongoing support to address STDs, with most going to local health jurisdictions
- $\$ 15.2$ million one-time allocation for grants to local health jurisdictions and nonprofits to support syringe exchange activities, of which $\$ 2.6$ million may be used for support and technical assistance for substance use


## 7. Gun Violence Prevention for Providers

a. UC Davis Violence Prevention Research Program

- Nicole Kravitz: UC Davis was the first state-funded center established and has received state funding since 2017, to address the fundamental gaps in knowledge about firearms violence and prevention. UC Davis had a long prior history going back over 3 decades, of involvement in similar topics through its Violence Prevention Research Program. Secondary centers have been added at UC Berkeley, UC Irvine, and UC Los Angeles. Funding has been extended in current year's budget. The Director is Dr. Garen J. Wintemute in Emergency Medicine. Research (some of which has completed a first year) focuses on 3 core areas: the nature of firearm violence including individual and societal determinants, the individual, societal, and community consequences, and prevention and treatment at the individual and societal levels.

Small research grants of about $\$ 10,000$ each to non-UC investigators are issued, and training is offered on conducting firearms research. UC Davis has been conducting California Safety and Well-being Survey starting fall of 2018. Such data had not been collected by the state for over 40 years. Topics surveyed include patterns of firearm ownership, and public attitudes about providers discussing firearms with patients and potentially initiating interventions when there is imminent risk, such as encouraging relatives or friends to safeguard firearms for a period of time (most Californians surveyed, including gun owners, considered such communication appropriate). Findings are disseminated, and a number of papers related to survey data are being reviewed currently.

- Rocco Pallin, "What You Can Do" Project: After the Las Vegas mass shooting in 10/17, Annals of Internal Medicine published a commentary urging providers to make a public commitment to counsel patients on firearm safety when indicated. Many providers gave feedback that they did not know how to evaluate risk or what to do about patients' answers. A Web site was established as a resource on how to assess patient risk and how to talk with patients, and some printable patient handouts. Also available is a 40-minute video for free CME credit (see link under 7c below) was prepared. A clinical guide was published last month in Annals of Internal Medicine with long and detailed article on screening and treatment of firearm injuries. The journal has provided free full text access of firearms-related articles. A bill in the Legislature would (see AB 521 below) to fund provider education on these subjects. Fact sheets will also be posted on the "about us" Web site above.
- Discussion: Mark Horton expressed his appreciation for the informative report, and commended the center's work. He said that one of the important reasons for bring this tope to the Forum is to assure that the other medical schools and public health schools are aware of the teaching materials and how to incorporate into curricula. Ron Hattis invited the presenters to email Web links for inclusion in these minutes. He also mentioned that the funding of the center was in part a reaction to Congress' prohibition of similar research and advocacy on firearms. A later follow-up might include Dr. Parsonnet, Dr. Wintemute, and the results of the legislative session.
- References:

Violence Prevention Research Center, UC Davis
https://health.ucdavis.edu/vprp/aboutus/index.html
What You Can Do initiative: online resource for providers on clinical strategies for preventing firearm-related harm

In The Clinic: clinical guide to firearm injury prevention published in Annals of Internal Medicine

What You Can Do to Stop Firearm Violence: by Dr. Wintemute published in Annals of Internal Medicine

A Focused Intervention: The Provider's Role in Firearm Violence Prevention: guest blog post for PLOS Speaking of Medicine

CME course on firearm injury prevention developed by the What You Can Do initiative (I know you have this one already, but including it again to round out the list)

More information on UCFC research findings can be found here, and this page will be updated regularly as our research
b. Other resources for physicians and medical educators (not presenting today): Julie Parsonnet, MD, Stanford School of Medicine

- Incorporating Gun Violence Prevention into Medical School Curriculum
- Stand Safe https://www.standsafe.org/scrubstand
c. Special free CME program for physicians, medical students
- CME California (UC Schools of Medicine, collaboratively), https://cmecalifornia.com/Activity/6694154/Detail.aspx


## 8. Pending Active Legislation on Gun Violence Prevention (Supplementing Already-Extensive California Gun Safety Legislation)

Text and history of all bills available at www.leginfo.legislature.ca.gov

- AB 521 (Berman), Funding for firearm safety training for physicians and other providers (see also 7a above; Dr. Wintemute is testifying today on this bill
- AB 61 (Ting), Allowing more people to file a gun violence restraining order if someone is threatening gun violence; a hearing must be held within 21 days, and an order may extend for a year and be renewed
- AB 645 (Irwin), Suicide Warning Statement on required sign in gun shops, and Safety Test Questions for Gun Purchase
- AB 1669 (Bonta), Controls on sale of ammunition at gun shows
- SB 701 (Jones), Banning firearm ownership if outstanding warrant
- 2-year bills (stalled this year but might reappear in 2020): AB 18 (Levine), tax on handguns and semi-automatics; AB 276 (Friedman), safe storage requirements; AB 503 (Flora), exception to firearms ban within 1000 feet of school grounds to allow an armed security guard at a religious service held on school grounds (there is otherwise a ban of fun possession within 1000 feet of school grounds, which Ron


## 9. California Medical Association

In the absence of an official representative, Ron Hattis mentioned pending Third Quarter resolutions include withdrawal of vaping products and nutritional supplements from market until approved by FDA (it would require federal legislation for supplements to be regulated like pharmaceuticals, and possibly also for vaping restrictions unless classified as drugs)
10. Osteopathic Physicians and Surgeons of California: Deferred

## 11. Health Officers Association of California (HOAC): Deferred

## 12. Other Updates from Schools of Medicine

UC San Francisco: George Rutherford reported that the fourth year of the new curriculum at UC San Francisco is being implemented this year. All students do projects, most of which can be considered as clinical epidemiology, and a few others in the area of public health. There is also an introduction to public health and global health done in the first year as part of the mandatory Epidemiology and Preventive Medicine curriculum. This replaced the previous emphasis on biostatistics and epidemiology methods.

The overall Bridges curriculum (the new curriculum) is described at: https://meded.ucsf.edu/bridgescurriculum. Epi/Biostats/PH/GH is part of the "Core Inquiry Curriculum" (https://meded.ucsf.edu/inquiry-curriculum), although it's not very clearly laid out as such. UCSF also teaches Designing Clinical Research to students at the end of their third years to prepare them for research projects in their fourth years. Finally, there is an intensive two-week "Inquiry Immersion" mini-course at the start of winter quarter of the third year. These are small seminars that meet 6-8 afternoons during this time with a range of topics (https://ucsf.app.box.com/s/1n3qt8w7mk5m8dl3u7kuojekw3gzw4j3). Dr. Rutherford taught this for two years with a small seminar focused on Zika virus biology, epidemiology and public health control measures.

UC Davis: Patrick Romano said that UC Davis wants to incorporate more public health into the curriculum and asked for email links from George Rutherford. These will be forwarded through Secretary Ron Hattis. Ron noted that curriculum development is a never-ending task, but the more it grabs the interest of the students, the better; and applicability of curriculum in epidemiology to the rest of what students are learning is important.

UC San Diego: Margaret Ryan said that UC San Diego has put out an announcement for the first Dean of the new School of Public Health. So far, co-sponsored programs with the San Diego State School of Public Health, including a joint doctoral program and co-sponsorship of the Preventive Medicine residency, have been unaffected.

Stanford: Eleanor Levin reported that Stanford is more research oriented. The pre-clinical years can optionally be extended from 2 to 4 years as the students earn a Master's degree in a related field (an MPH can be obtained if time is spent at UC Berkeley School of Public Health. $80 \%$ of students complete medical school in 5 years because of a year of research. Ron Hattis said that Stanford can be proud of the great leaders in medical research that this approach has produced.

## 13. Updates from Schools of Public Health

UC Berkeley: The new Dean of the School of Public Health, Dr. Michael Lu, has joined our Forum. Mark Horton is on the Dean's Policy Advisory Council and will be meeting with Dr. Lu. This is an exciting time for a new Dean as the school has just occupied a new building.

## 14. Next Meeting: A Tuesday Morning in September or October 2019, Agenda Ideas

Eleanor Levin suggested that the next meeting be in September, and suggested that vacations account for today's low attendance. Increasing heart disease among younger people may deserve discussion due to obesity and diabetes. Ron suggested late September or early October because this meeting is in July rather than June. Dr. Horton's time commitments may influence the date. Aimee Sisson suggested that we discuss immunization, and the results of legislation for public health to review applications for vaccine exemptions. Gil Chavez offered to have the Immunization Program participate. Mark Horton suggested discussing how to talk to parents who are reluctant to immunize their children.

Submitted by Ron Hattis, Secretary, and approved at $24^{\text {th }}$ meeting on $10 / 8 / 19$.

