

**QUARTERLY MEETING OF THE
ARKANSAS STATE BOARD OF HEALTH**

October 25, 2018

MEMBERS PRESENT

Catherine Tapp, MPH, President
Nathaniel Smith, M.D., MPH, Secretary
James Zini, D.O., President-Elect
Terry Yamauchi, M.D.
Greg Bledsoe, M.D.
Marsha Boss, Pharm. D.
Vanessa Falwell, APRN
Phillip Gilmore, Ph.D.
Lee Johnson, M.D.
Thomas Jones, R.S.
David Kiessling, D.P.M.
Mike Riddell, M.D.
Susan Weinstein, DVM
Susan Ward-Jones, M.D.
Robbie Thomas-Knight, Ph.D. (via phone)
Beverly Foster, D.C.(via phone)
Glen "Eddie" Bryant, M.D.(via phone)

NOT PRESENT:

Miranda Childs-Beebe, D.D.S.
Lawrence Braden, M.D.
Perry Amerine, O.D.
Alan Fortenberry, P.E.
Anthony Hui, M.D.

GUESTS PRESENT

Stephanie Williams, Deputy Dir. for Public Health Programs
Namvar Zohoori, M.D., Chief Science Officer
Laura Shue, General Counsel
Reginald A. Rogers, Deputy General Counsel
Vicki Pickering, Department Administrative Law Judge
Brooks White, Department Administrative Law Judge
Jane Gaskill, Department Attorney
Renee Mallory, Dir., Center for Health Protection
Greg Brown, Branch Chief, Trauma and Emergency Response Branch
James Bledsoe, M.D., Medical Dir., EMS and Trauma
Don Adams, Dir., Center for Local Public Health
Dr. Joseph Bates, UAMS, Senior Public Health Advisor
Dr. Glen Baker, Dir., Public Health Lab
Shane David, Pharm. D., Dir. of Pharmacy Services
Connie Melton, Branch Chief, Health Systems Licensing/Certification Branch
Kelli Kersey, Section Chief
Becky Bennett, Health Facilities Section Chief
Shirley Louie, Dir., Center for Public Health Practice
Marisha DiCarlo, Ph.D., Dir. Health Communications
Meg Mirivel, Public Information Specialist
Dr. Dirk Haselow, Deputy Chief Medical Officer
Abby Holt, Cancer Research Administrator, CPHP Health Statistics
Kristyn Vang, Cancer Epidemiologist
Brandy Sutphin, Senior Epidemiologist
Lynda Lehing, Branch Chief, Health Statistics Branch
Jessica Upchurch, Administrative Specialist
Rose Mimms, Arkansas Right to Life
Deborah Bruerman, Family Council
Tonya Osagie, Phase One School of Cosmetology

MEETING OF THE ARKANSAS STATE BOARD OF HEALTH

The quarterly meeting of the Arkansas State Board of Health was held Thursday, October 25, 2018, in the Charles Hughes Board Room of the Freeway Medical Building in Little Rock, Arkansas.

CALL TO ORDER

The meeting was called to order at approximately 10:05 a.m. by President Catherine Tapp, with Dr. Robbie Thomas-Knight, Dr. Glen "Eddie" Bryant, and Dr. Beverly Foster participating by teleconference.

APPROVAL OF MINUTES

President Tapp stated that Reginald Rogers had provided the Board with a copy of corrected minutes, and the Board was given a few minutes to review the corrections. Dr. Beverly Foster asked that Mr. Rogers explain the changes for the Board members that were appearing via teleconference. Mr. Rogers pointed out that the changes were only typographical errors with no substantive changes.

Dr. James Zini made a motion for approval of the July 26, 2018, Quarterly Minutes, as amended. The motion was seconded by Dr. Phillip Gilmore. The motion carried unanimously.

Dr. Nathaniel Smith introduced two new Department of Health staff members to the Board: Dr. Shane David, the new Director of Pharmacy Services, and Laura Shue, the new General Counsel.

Laura Shue hand-delivered a letter to the Board members from Representative Robin Lundstrum regarding an item on the agenda. Ms. Shue stated that there had also been a request for the abstention of several Board members with regards to a vote that could be considered controversial. Ms. Shue explained that the determination of whether to abstain is a matter that members must make for themselves if they consider themselves to be personally interested in any matter that is presented to the Board.

Dr. Smith stated that the basis for the abstention request was the members' relationship to the Department of Health and asked for Ms. Shue's guidance in deciding whether that factor should be considered. Dr. Terry Yamauchi noted that he was asked to abstain, but stated that he did not feel that he had any conflict requiring abstention. However, he stated that he felt there was a negative connotation requiring abstention simply because he was listed on the request.

Ms. Shue explained that the decision to abstain is an individual determination, and if the Board member determines that the connection to the Department of Health would influence his or her vote, then perhaps abstention would be necessary. She emphasized, however, that the connection to the Department of Health would not necessarily disqualify the Board member from making decisions for the Board of Health.

Tom Jones stated that he had been an employee in the Environmental Department of the Department of Health for approximately 45 years, and stated that he was on the Board as a registered sanitarian and as a “non-medical” citizen. Mr. Jones stated that he would participate in the vote.

OLD BUSINESS

There was no discussion of old business.

NEW BUSINESS

Cancer Registry Data

Abby Holt introduced the new cancer epidemiologist for the Department, Kristyn Vang, who was there to present three research requests of cancer studies to the Board. The three research requests were from the North American Association of Central Cancer Registries requesting use of Department of Health data in its research. Ms. Vang noted that the studies had been approved by Science Advisory Committee and the Board of Health subcommittee, but stated that Board of Health approval was necessary as well. The research requests were: breast cancer, in U.S. women ages 20 to 39, U.S. rates of Kaposi Sarcoma in HIV-infected People, state-specific trends and associations with ultraviolet radiation, and International comparison of cancer survival-comparing high-income Americans to average residents of other developed nations.

A motion to accept all three requests was made by Dr. Sue Weinstein. The motion was seconded by Dr. Beverly Foster. The motion carried unanimously.

Abortion Facilities regarding Planned Parenthood Appeals

Laura Shue stated that the Board was provided with the materials prior to the meeting regarding the Planned Parenthood appeal. Ms. Shue explained that the Department investigated a complaint that three facilities represented by the Respondents, were non-compliant with a payment delay requirement. The Department found that the complaints were substantiated and cited the respondents for deficiencies under the law. After notice of the deficiencies was provided, the Respondent appealed. Ms. Shue advised that the Board was to make a determination based on the written pleadings alone with no fact finding or oral argument. Ms. Shue stated that after thoughtful consideration of the three briefs and materials, the Board was being asked to vote on whether the Department’s findings should be upheld or rejected.

Dr. Robbie Thomas-Knight asked why the Department deviated from its usual process of having a subcommittee review the information and make a recommendation to the Board. Reginald Rogers stated that Robert Brech, former general counsel, had discussed the matter with opposing counsel, Bettina Brownstein, and it had been agreed that since the facts were not in dispute, it would be more efficient to present the issues to the full Board.

Laura Shue explained that the Board does not have the authority to determine the constitutionality of the statute in question, but stated that in order to preserve the constitutional questions for appeal the issues were included in the briefs along with the other claims. Ms. Shue stated that the Administrative Procedures Act gives a party that is adversely affected by an

agency adjudication the opportunity to seek judicial review of an agency action. Judicial review is offered only after a party has exhausted its remedies at the administrative level.

Dr. Lee Johnson asked whether the Respondents denied violating the statute. Mr. Rogers responded that it was the Department's understanding that the facts were not in dispute and advised that the review was to be limited to the pleadings. Mr. Rogers stated that Ms. Brownstein, attorney for Planned Parenthood, was available for questions if necessary.

Dr. Mike Riddell asked about the requirement of complying with the statute and stated that the costs incurred by facilities are for ultrasound services and would put the facilities in a "double bind" situation. Dr. Thomas-Knight stated that she agreed.

Ms. Shue emphasized that what was before the board were the briefs, the timeline, and the procedural history. She reminded the Board that prior to the vote, the Board members would need to determine whether they would abstain.

Dr. Greg Bledsoe made a motion to accept the Department of Health's findings regarding Planned Parenthood. Dr. Susan Ward-Jones seconded the motion. Eleven Board members voted in favor, with Dr. Sue Weinstein and Dr. Robbie Thomas-Knight voting no. The motion passed.

Three Board members abstained from the vote: Dr. Marsha Boss, Dr. Terry Yamauchi, and Vanessa Falwell.

Cosmetology Appeal – Phase One Cosmetology School

Vicki Pickering, legal counsel for the Cosmetology Technical Advisory Committee, presented the appeal from a hearing held on May 21, 2018, in which Phase One School of Cosmetology was found to have submitted incorrect hours for 21 of its students to the Cosmetology Section in violation of Rule 7.21 (B) of the Cosmetology Rules. Ms. Pickering stated that the Committee found Phase One in violation and issued a civil penalty of \$200 per student for a total of \$4,200.

Tonya Osagie, owner of Phase One School of Cosmetology, appeared before the Board, and stated that she felt irrelevant information was given to the Committee that affected its decision. Ms. Osagie further stated that the fine was excessive for a first offense. Ms. Osagie explained that she calculated the hours by hand and made mistakes.

Dr. Yamauchi questioned whether fraud was potentially committed by Phase One. Ms. Pickering explained that the Committee did not investigate for fraud, but only looked at the violation of the rules/regulations that require a school to submit the correct number of hours to the section. Ms. Pickering stated that if the Board wanted, the Cosmetology Section could investigate and pursue the fraud issue.

Dr. Yamauchi asked whether there was a set fee that could be imposed. Ms. Pickering stated that the penalty was based on § Ark. Code Ann. 17-26-104 that provides for a penalty of \$25.00 to \$1,000.00 per violation. The Committee determined each violation to mean per student, so an assessment of \$200 per student was imposed.

Dr. Zini asked Ms. Osagie whether she contended that the mistakes did not occur. Ms. Osagie responded that she was not contesting the findings of fact, but was stating that mistakes were made. Dr. Zini asked what Ms. Osagie was doing to correct her previous process. Ms. Osagie responded that she bought another time clock that was more efficient.

Dr. Weinstein asked what an average fine would be for this type of cosmetology complaint. Kelli Kersey, the Section Chief, stated that there had only been one other hearing against a school for submitting incorrect hours and in that case, the Committee imposed a fine of \$1,000.00 per student.

Dr. Johnson stated that in his experience, the Committees spend a lot of time working through the process, listening to the facts and deliberating the decision.

Dr. Zini called for a motion to accept the Committee's recommendation, and Dr. Smith seconded the motion. The motion passed unanimously.

Controlled Substance Emergency Role

Laura Shue presented the new emergency additions to the list of controlled substances to the Board. She explained that emergency additions to the controlled substances list do not require Board approval and stated that the additions were considered to be "emergency" because of the potential to cause imminent peril to the health and safety of Arkansans. Ms. Shue stated that upon approval by the Governor and the Executive Committee of the Legislative Council, the controlled substances were added to the list and included on the Secretary of State website and the Department of Health's website. The additions will go into effect on November 1, 2018 and expire on May 1, 2019. Prior to the expiration date the Department will pursue permanent promulgation of the additions along with another list of substances that would be discussed later.

Dr. Shane David, the Director of Pharmacy Services, was available for questions from the Board. Dr. Marsha Boss asked what the "street names" were for the emergency additions. Dr. David explained that the list did not include synonyms or street names, but stated that the term K2 is the general term that is used for these type of substances. Dr. Smith stated that the ingredients of substances with product names of "K2" and "spice" vary over time, and he stated that it is his philosophy to schedule the substances as fast as someone can synthesize them.

Dr. David stated that the Department had scheduled a cannabidiol product as a Schedule V that had been approved by the FDA in June and added to the federal registry as a Schedule V controlled substance by the DEA in September. Dr. David stated that the brand name of the product is Epidiolex®, and it is used to treat two seizure disorders, Lennox-Gastaut syndrome and Dravet syndrome, both of which develop in early childhood and are oftentimes treated unsuccessfully with anti-epileptic treatment. Dr. Smith stated that this is a pharmaceutical grade cannabidiol product with fixed concentrations so the pediatric neurologists can prescribe the medication and know exactly what the patient is receiving.

Dr. David explained that it was important to add this product to the list of controlled substances so that there is no conflict with the federal government, allowing distributors to ship the product and make it available in Arkansas. Dr. David also noted the importance of stating that the product has to be FDA approved.

Dr. Zini asked about the difference between this product and CBD oil purchased from health food stores. Dr. David stated that CBD oils sold over the counter are marketed as supplements indicating that they are for treating various health concerns. However, as noted by Dr. David, the products are not required to go through strict testing for concentration and verification, making it impossible to know if the products have THC in them. Dr. David explained that if the products have any THC in them, they would be classified as Schedule VI drugs.

Dr. Bledsoe stated that it was encouraging that Arkansas now has an FDA-approved product with the potential to help people medically, allowing physicians to dose appropriately for patients. By allowing this product, Dr. Bledsoe stated that it helps with people who might be treated with cannabidiols and other compounds in marijuana, while also eliminating fraud and other problems that arise with people smoking or ingesting the whole marijuana plant.

Dr. Boss asked what the mode of administration was for the Epidiolex®. Dr. David stated that it was an oral solution.

Controlled Substance Rule

Laura Shue presented the proposal of controlled substances for permanent promulgation, including the items that were designated for emergency rule. Ms. Shue stated that the Department was simultaneously seeking Board approval and approval from the Governor's office. Upon approval, Ms. Shue stated that the Department would proceed through the promulgation process.

Dr. David explained that Syndros®, a new THC oral solution, was being added to the controlled substance list through regular promulgation and would be available for patient use. He stated that Syndros was added as a Schedule II drug to mirror the DEA and federal guidelines.

Dr. Boss asked why Epidiolex was a Schedule V and Syndros® was a Schedule II. Dr. David explained that the schedule was based on the DEA's classifications and stated that the classifications were based on the potential for abuse.

A motion to approve the rule was made by Dr. Bledsoe and was seconded by Dr. Susan Ward-Jones. The motion carried unanimously.

County Health Officer

Dr. Namvar Zohoori presented Dr. Carolyn Dillard as County Health Officer for Crawford County. Dr. Zohoori stated that Dr. Dillard had been nominated by Judge Dennis Gilstrap and Michelle Hammer, the Crawford County Health Unit Administrator. Dr. Dillard is a family practice physician who received her education at Oklahoma State University College of Osteopathic Medicine. Dr. Zohoori noted that Dr. Dillard has been a resident of Van Buren for a number of years and is currently the owner of the Pointer Trail Family Clinic.

Dr. Zini made a motion for approval, stating that Dr. Dillard is highly qualified and will be a great asset. The motion was seconded by Dr. Weinstein and passed unanimously.

EMS: Chad Lance

Brooks White, legal counsel for EMS, presented Proposed Findings of Fact, Conclusions of Law and Order involving Chad Lance to the Board for approval. A hearing was held on August 1, 2018, before a Board of Health subcommittee including Dr. Terry Yamauchi, Dr. Mike Riddell, and Dr. Phillip Gilmore. Mr. White stated that Chad Lance was a licensed paramedic in Arkansas and Indiana. While working in Indiana, Mr. Lance's Indiana license was suspended for two years for performing an act of malpractice on a patient he was transporting. When Mr. Lance attempted to renew his license in Arkansas, he answered incorrectly on the renewal form that no disciplinary action had been brought against him in any state in the past two years and that his license had not been revoked or suspended in any state during the past two years. Arkansas became aware of his license suspension in Indiana and initiated proceedings against him for both the dishonesty on the application and the substantive act of malpractice.

Dr. Zini asked if the revocation would be open-ended. Mr. White stated that the revocation was open-ended, but that the EMS rules are not concrete as to when he could reapply in the future. Dr. Lee Johnson made a motion to accept the recommendation of the subcommittee. The motion was seconded by Dr. Zini. The motion carried.

EMS: Tony Meador

A proposed Consent Agreement to discipline a licensed paramedic, Tony Meador, was presented to the Board for approval by Brooks White. Mr. Meador was discovered to have injected himself with Dilaudid® and morphine from his ambulance while on duty. Mr. Meador agreed to six months of suspension, retroactive to July, 2018, with 24 months of probation following the suspension during which time he would be subjected to random drug testing by the Department. Mr. White informed the Board that Mr. Meador had undergone and completed a drug treatment program.

Dr. Boss stated that the penalty seemed rather light compared to others that have been disciplined.

Dr. Zini stated that he is willing to offer someone help, but asked how it could be proven that Mr. Meador was continuing to improve and had the ability to work with the public. Mr. White answered that Mr. Meador would be subject to drug testing at any time and if Mr. Meador had a positive drug test, the Department would pursue all disciplinary action that was available.

Greg Brown, the Center Director for Trauma, stated that this was the first case in which the Department had disciplined an EMS driver for substance abuse. He said that the staff reached out to other states and commissions to see how they had dealt with these type of cases, and it had been determined that this penalty was consistent with the treatment of other first-time offenders. Mr. Brown emphasized that Mr. Meador had gone through inpatient treatment on his own and had a certificate for completion of two months of treatment. As part of the agreement, Mr. Brown stated that Mr. Meador would be drug tested weekly until the end of the year, and if he did not remain clean the Department would look at pursuing other punitive measures. It was also noted that Mr. Meador was currently working as a dispatcher and has had no direct patient care since July.

Dr. Yamuachi questioned whether Mr. Meador had admitted to his addiction. Mr. Brown answered that he admitted he had a problem by entering into the drug treatment process he went through.

Dr. Weinstein asked whether the drug testing would be an observed sample. Mr. Brown stated that it would be observed and that Mr. Meador would have 24 hours to respond to the request for testing.

Dr. Johnson noted that paragraph 6 of the agreement would need to be changed from 48 hours to 24 hours of response time and the chain of custody would need to be added to ensure the testing was observed.

Dr. Weinstein moved to accept the Consent Agreement with the noted changes, and Dr. Johnson seconded. The motion carried unanimously.

President Tapp asked that the Board be updated on this case at the January meeting.

EMS: Chris Hogan

Brooks White presented a Consent Agreement involving a licensed paramedic, Chris Hogan, to the Board for approval. EMS discovered that while on duty, Mr. Hogan had taken five times his regular dose of benzodiazepine and taken nitroglycerin from the ambulance.

The proposed Consent Agreement was for three months suspension, 18 month probation and to comply with the procedures set out in the Agreement. Reginald Rogers explained that a portion of the agreement had been redacted to protect Mr. Hogan's privacy regarding the services and treatment he was receiving.

Dr. Boss asked whether Mr. Hogan would be tested for drug use. Mr. White responded that there was no evidence of an ongoing addiction, so testing was not included in the agreement.

Dr. Ward-Jones asked who would be conducting the evaluations of Mr. Hogan, and Mr. White responded that the company he worked for would be monitoring him.

Dr. Riddell made a motion for approval, and Dr. Weinstein seconded the motion. The motion carried.

OTHER BUSINESS

Administrative Updates

Laura Shue presented an update to the Board on the Licensed Lay Midwives complaint that was received by the Department on October 8, 2018. Ms. Shue stated that the Department had employed the assistance of the Attorney General's office, and Civil Department Deputy, Monty Baugh and Senior Assistant Attorney General, Jennifer Merritt had entered an appearance in the case.

Ms. Shue explained that the legal action was a challenge to the rules that were promulgated after three years of discussion and obtaining information from the Advisory Board and through public

comment that went into effect in June 2018. This specific case involves two pregnant women who would like to employ licensed lay midwives to perform VBACs (vaginal birth after cesarean) at home.

A hearing was held on October 24, 2018, before Judge Chris Piazza to address a temporary restraining order that had been requested by the Plaintiff's. At the hearing, Judge Piazza took testimony from the pregnant women and from Dr. William Greenfield, who explained why the rules prohibit the practice of VBAC. At the conclusion of the hearing, Judge Piazza denied the request for a temporary restraining order.

Ms. Shue stated that Rhonda Kitelinger and Shelly Matthews, both with the Department, have been very helpful in providing information to the Attorney General's office.

Ms. Shue noted that a Motion to Dismiss had been filed by the Attorney General's office that was based on sovereign immunity and the fact that the Administrative Procedures Act was followed in a reasonable manner, and the Department and the Board did not promulgate the rules in an arbitrary and capricious manner.

Dr. Mike Riddell asked if there was a time frame on when a decision would be made on the Motion to Dismiss. Ms. Shue answered that the Judge had considered some of the information at the hearing, but noted that there was a lot of material and numerous exhibits to review so there was no way to determine how much time it would take.

Science Update

Dr. Namvar Zohoori provided a Science Update to the Board. Dr. Zohoori stated that there are two main ways that the Department measures its success in meeting the mission to protect the health and well-being of all Arkansans: Public Health Accreditation and the movement for the Department to be recognized as an academic health department.

Regarding accreditation, Dr. Zohoori reported that the Health Department applied for and received accreditation in 2016, which is a measure of how well the Department is performing its duties, addressing continued performance management and continuous quality improvement. Dr. Zohoori stated that the five-year accreditation would be up for renewal in 2021, requiring that the Department meet a number of requirements and measurements. He stated that the Department, through a Steering Committee, is now in the process of revising the State Health Assessment Document that would eventually lead into the State Health Improvement Plan.

Dr. Zohoori stated that over the past few years, there has been a national movement for health departments to be recognized and function as academic health departments. He explained that this is a measure of how much the Department is involved in public health science in the use and reliance of science and data. It was noted that Dr. Bates started this movement in the Department several years ago and has been very successful in leading the Department to where it is now. Dr. Zohoori stated that the Department has completed the five stages necessary to be considered an academic health department and has entered into a Memorandum of Understanding with the College of Public Health setting out steps to improve and increase the collaboration between the two agencies.

It was reported that one of the factors that determines the Department's success is the availability and use of the Department's data. Dr. Zohoori stated that the Department is in a constant process of improving the access and use of the data. The network of associate directors for science in each of the Centers, along with the Science Advisory Committee welcome and solicit applications for the use of the Department's data.

The Department is also developing a webpage that provides a link to the office of the chief science officer and lists a number of data sets that are available for researchers to use. In addition, there is an application form that provides the names to all the variables that are available. The researcher is given the ability to upload the protocol, upload the IRB approval, and get routed to the various programs in the Department for review and approval, helping to speed up the access to the data.

Dr. Zohoori explained that the Cancer Registry is one of the data sets that takes the longest time to review and release from the Department. He shared an outline of the process, demonstrating the steps necessary to get access to the data from the Cancer Registry. The process was explained as follows:

1. The researcher and program determine what data is available, work with the IRB and write the protocol.
2. Once protocol has been written and the IRB has been approved, the application goes through formal review by the Cancer Registry Staff and epidemiologist as well as the Center Director and Associate Director for Science. This process is fairly quick, taking approximately a week to complete.
3. The application then goes to the Science Advisory Committee where it is rigorously reviewed. The Committee decides whether the study meets the criteria for release of the data. The Committee meets twice a month, so the process can take up to two weeks depending on when the application is presented for review.
4. Once approved by the Science Advisory Committee, the application goes to the Board of Health subcommittee, which can take up to three months depending on timing and when the subcommittee meets.
5. If approved by the subcommittee, the application is reviewed by the Executive Committee to determine whether it should be put on the Board of Health's agenda for its next meeting. If approved, the Board of Health reviews the request for approval.
6. Once approved by the Board of Health, the Department writes a Memorandum of Agreement and makes arrangements for the data to be used.

Dr. Zohoori explained that there are passive requests that are more confidential, do not require any identifying information, and are more granular, state-level data. The Board of Health Subcommittee is able to approve these requests. Active requests require data at a level that is more granular than state-level data and would require full Board of Health approval.

Dr. Zohoori reported that he was in discussion with the Department, reviewing the rules and regulations and the legal aspects of what could be done to improve the access to the data.

Dr. Riddell left the meeting after Dr. Zohoori's report.

Hepatitis A Outbreak and Flu Update

Dr. Dirk Haselow, the Deputy Chief Medical Officer, presented a report on the recent Hepatitis A outbreak and the flu in Arkansas. Dr. Haselow stated that typically in Arkansas there are between five and ten cases of Hepatitis A reported per year. This year, there were 65 cases reported in July and 178 cases reported to date. Dr. Haselow reported that the character of the outbreak has not changed in that it is still primarily in Northeast Arkansas in Clay, Greene and Craighead counties, with nine cases of the infection being traceable to a food worker. As a result of the infection in food workers, Dr. Haselow stated that the Department has created community-oriented clinics for people who have eaten food at the particular establishments. Most recently, there has been exposure at the ASU campus cafeteria as well as at a Salvation Army in Craighead County. According to Dr. Haselow, the reasons for the outbreak are unusual in that it has been closely linked with homelessness and injection drug use. It was noted that Hepatitis A is generally spread by food, but it has not been confirmed in these cases that the infection was acquired by a food-borne route.

Dr. Haselow reported that there are 15 states that are plagued by Hepatitis A currently, including Tennessee, Louisiana and Kentucky (with approximately 2,200 cases). The CDC Advisory Committee has weighed in on the outbreak, uniformly recommending Hepatitis A vaccinations among people that are homeless. Dr. Haselow stated that the Department is trying a variety of pilot programs to intervene in this outbreak, including reaching out to people that are homeless, who are often difficult to enumerate and locate.

Dr. Boss asked why the infection was found on a college campus if this was a homeless issue. Dr. Haselow stated that he did not want to speak about the individual characteristics of the cafeteria worker, but stated that the worker shared some of the common risk factors.

Dr. Zini stated that the infection was apparently being transmitted by the IV route. Dr. Haselow stated that generally Hepatitis A is shed at a high concentration in stool and is spread through food contamination. In the recent cases, Dr. Haselow reported that it is difficult to confirm whether the infection is being transmitted by that route because there has been transmission through households or close contacts. However, it has been newly recognized that people will have the virus in their blood for a period of time and can transmit the infection through injection drug use and the sharing of needles.

Regarding the flu, Dr. Haselow recognized that 2018 is the 100th anniversary of the 1918 flu, the worst infectious disease outbreak in history. To acknowledge the anniversary and prepare for flu season, Dr. Haselow reported that the Health Department has initiated a number of things across the state to combat the flu. The efforts included a large media event where the flu vaccine was offered to reporters and senior staff to acknowledge the importance of the flu vaccination. The Department has reached out through local public health colleagues to perform mass clinics in every county of the state, and there is a major push to have clinics in all public school systems in the state.

Dr. Haselow stated that it is hard to say what is predicted for the state's flu season, but noted that there appears to be a dominance of the H1N1 strain that tends to result in fewer fatalities than the H3 strains.

Ms. Vanessa Falwell asked how this flu season compared to last year. Dr. Haselow stated that it was much better, noting that last year was the worst flu season in the last 30 years.

Dr. Weinstein asked about the flu vaccine for the elderly. Dr. Haselow stated that there is a higher-dose vaccine for people over the age of 65, but noted that in clinical terms it is not clear that there are any major differences. Dr. Smith stated that there is a trivalent vaccine that is indicated for older individuals.

Dr. Boss asked about the shingles vaccination and whether it is known to cause shingles. Dr. Haselow stated an uncommon side effect is the development of lesion around the site, but the development of shingles does not happen. Dr. Smith stated that there is a new vaccination for shingles, Shingrix, that is not a live vaccine, so lesions are not a risk factor. Dr. Zini stated that even if you had received the prior shingles vaccination, Zostavax, the CDC recommended getting the Shingrix that gives about five years of protection.

Program Update

Stephanie Williams, Deputy Director of Programs, reported that the Department has completed the roll-out of vital records services to all 75 counties in Arkansas.

Ms. Williams stated that the Department has been working to bring tobacco cessation in-house instead of offering it through a contractor. She reported that not only has the Department developed the in-house plan for tobacco cessation, but it has also developed a “Be Well” platform to offer wellness counseling relating to diabetes and hypertension. Ms. Williams stated that the “Be Well” platform will go live on November 5, 2018, and she hoped to be able to provide a full report of the program at the January Board meeting. The current tobacco quit line, 1-800-QUITNOW, would roll to the new “Be Well” platform and there would be a new “Be Well” number, along with a website and online app where people could enroll for services. Ms. Williams stated that another component of the platform would require wellness counselors in all call centers to be certified by M.D. Anderson as tobacco treatment specialists. Further, the staff in the local health units would be trained so callers could be linked with tobacco treatment specialists in the local health units for an in-person experience if that was preferred. The Department has also scanned other available services in the state so callers could be informed of other tobacco cessation providers, such as Baxter Regional and UAMS East that could offer services.

Ms. Williams reported that one of the Department’s concerns with its previous services was providing those services to callers that had commercial insurance and other avenues available. As part of the Department’s intake with the new program, she stated that the callers would be screened and educated about benefits that are available through commercial carriers, making it possible to focus on individuals who have Medicare, Medicaid, or don’t have a commercial plan.

Dr. Zini asked about funding for the new program. Ms. Williams stated that funding will be provided through the master settlement dollars, just as the previous quitline had been funded. However, she stated that the previous budget was \$1.3 million, while the estimate for providing the new program is just over \$700,000.

President’s Report

President Tapp reminded the Board members to get their flu shots.

Dr. Zohoori reminded the Board that educational sessions would be provided following the January and July board meetings, instead of at an October retreat. He stated that he and Dr. Bates have begun planning the educational session for the January Board meeting.

Director's Report

Dr. Smith reported that Governor Hutchinson had announced a comprehensive plan for the transformation of state government, reducing it from 42 level cabinet positions to less than 15. As part of the plan, the Department of Health will remain as cabinet level agency, and a number of boards and commissions will be coming under the Department. Dr. Smith stated that the plan will go through the legislative process and will possibly be implemented in August. Dr. Smith noted that the Department had reached out to boards and commissions that are coming under the Department of Health, looking for ways to create a very supportive environment for their work. The only change for the Board of Health would be that some sections, such as Cosmetology, HVAC, Plumbing, and Massage Therapists, would be moving to the newly created Department of Labor and Licensing.

Mr. Reginald Rogers mentioned that the cancer registry meeting would be held immediately after this meeting.

The meeting adjourned at approximately 12:00 p.m.

Respectfully submitted,



Nathaniel Smith, M.D., MPH
Director and State Health Officer
January 24, 2019