

Saint Paul – Ramsey County Statewide Health Improvement Program (SHIP) Community Leadership Team Community Health Improvement Plan (CHIP) Action Team Meeting Minutes

December 4, 2019

Members Present/Representation

Eugene Nichols | County at Large Hanna Getachew-Kreusser | Mayor Appt Regina Rippel | Mayor Appt Heather Peterson | Allina Health Deana Varner | HealthPartners Joan Pennington | HealthEast Aisha Ellis | Co District 2 David Muhovich | Mayor Appt Sarah Sanchez | American Heart Association Alyssa Fritz | County at Large

SPRCPH Staff:

Kathy Hedin | Interim Director Carissa Glatt | Health Educator Pa Shasky | Health Educator Franny Clary-Leiferman |Health Educator Kee Vang | Healthy Communities Interim Manager Ann Tranvik | Public Health Nurse William Moore | Health Educator Mary Nystrom | Support Staff Cathy St. Michel | Support Staff

Guests:

Dr. Paul Pentel | Association for Nonsmokers-Minnesota (Vice-President) Katie Engman | Association for Nonsmokers-Minnesota (Program Director) Jolie Woods | Policy Analyst Ramsey County

The meeting was called to Order at 5:30 pm by Regina Rippel, Co-Chair. Everyone was welcomed to the meeting and introductions were made.

A motion was made Regina and seconded by Gene Nichols to approve the minutes for August as written. The motion was passed by affirmation of the committee.

Agenda item:	Speaker/Discussion:
Vaping Updates and SHIP Work, Dr. Paul Pentel (Vice President) and Katie Engman (Program Director) – Association for Nonsmokers - Minnesota	Dr. Paul Pentel from the Association of Non-Smokers of Minnesota presented and explained information regarding E-cigarette or Vaping Associated Lung Injury, also known as EVALI. A couple of weeks ago there were less than 3000 cases reported to the Centers for Disease Control, which resulted in 49 deaths. Symptoms and signs of lung injury are coughing, chest pain and abdominal pain. An X-ray was shown with normal and severe lung injury. The CDC found an oily substance in fluid samples collected from the lungs of 29 patients which appeared to be Vitamin E liquid, although they concluded that there may be more than one cause of this disorder. Dr. Pentel explained what the Vitamin E acetate was doing in there: A vaping cigarette drawing was shown and broke down the parts and pieces. The device itself is straightforward, but it turns out to be complex to study and a consumer to evaluate. Because

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it is not a regulated product, the manufacturer is not required to test for safety. Our handicap is being able to learn anything about e-cigarettes. People may not realize it is not a regulated device. Manufacturers are also not required to reveal design detail like metals and heating characteristics. The first E-cigarette did not deliver nicotine, but now delivers nicotine more effectively than a cigarette. If the manufacturer claims it is for therapy, it is regulated. If they simply claim informally that it is good for helping quit smoking, the device is not regulated. Questions were asked if a person could get addicted to an e-cigarette more than nicotine? Dr Pentel addressed in his presentation that the cons we are dealing with are developmental effects of nicotine and rising nicotine addiction in teens. E-cigarettes contain E-liquid, which is a desired drug like nicotine, THC and Marijuana extract. Inhaling something E-liquid is totally different from smoking. Lungs are exposed to toxins. Inhaling the substances can have very different effects. Vitamin E tobacco flavoring can produce carcinogens. At first e-cigarettes were thought to be safer than cigarettes, but now we are finding more about their toxicology.

We also need to address flavors. Kids are attracted to them. Companies such as JUUL no longer have flavored pods. In the meantime, it has opened the market for knock offs such as "Just pods.". The product OMG looks just like a USB port.

Members questioned if e-cigarettes are safe. Dr Pentel stated there is a lot of work going on now with mixes of commercial products that have nothing to do with Vitamin E acetate. Studies seen in mice with ecigarette exposure tests are all we have to go by. There are mice that were exposed for 12 hours a day inhaling vapors. In one study the mice vaped for months, then were challenged with influenza virus. Some mice suffered DNA damage in the lungs and bladder. The same group reported a one-year long exposure and found lung cancer in many of the mice. To put it in prospective, it is a tug of war in public health and communities to decide if e-cigarettes are safer. If people changed to e-cigs, how is mortality changed?

Members asked to look at the wording of how we speak about smoking cessation. Will it stop you from smoking? Stop the addiction? Can we be more direct with the language? People are saying it is a good product because "I'm not smoking cigarettes" etc. More attention is being paid to smoking cessation. The language should be more about the nicotine. The addiction to nicotine is what is harmful.

We are able to use approved nicotine products for smoking cessation and they can be used for years. E-cigarettes would be another form of delivering nicotine, but the delivery system is a real problem. The FDA approved it, so kids thought it seemed to be safe. People do not use nicotine replacement products for a lifetime. There are questions if there are any regulated e-cigarettes for people who need to or want to stop

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	being on nicotine. There is no step-down delivery. There is nothing being prescribed by a Doctor. Even if Vitamin E turns out to be a culprit, we do not know the mechanism or what other chemicals may do the same thing. Regarding policy's, the risks are borne primarily by children. At this point we cannot assume e-cigs are a harm reduction product. Two informational links will be sent out and accessible from two local publications titled "When Vaping Kills" and "HealthPartners cardiologist says we need to stop denying the dangers of Vaping" Katie Engman, Program Director from the Association of Nonsmokers- Minnesota, stated we are all aware of the epidemic we are facing. Please see handouts from Katie on this subject. Two big policy initiatives being addressed are flavor restrictions and increasing the age to purchase to 21. Communities in Ramsey County and a handful in other counties have all regulated the sales of e-cigarettes. You cannot sell any flavored e-cigs in convenience stores, only sold in tobacco stores. This legislation is trying to get e-cigs out of where people are accessing other unhealthy products. Adults want e-cigs in Tobacco stores, so kids do not have easy access to them. The movement has been on fire. Over 53 communities in Minnesota have raised the tobacco age to 21. Minnesota powers said we could not ban sales of e-cigs. To give young people a voice will help. As far as the state, there is great support from the House and are seeking support from the Senate. The Governor says he supports flavoring restrictions. How can we help? Support the state, they need to act. Our kids cannot wait. There is a lot of work happening in the Metro area. We need the rest of state to follow. Our Tobacco 21 program is taking action to increase the tobacco sale age to 21, which will help protect youth from a lifetime of addiction.
Impact of the 2020 Census in Public Health, Jolie Wood (Policy Analyst), County Manager's Office	The 2020 Census has a huge impact on the County, State and Public Health. Every 10 years everyone must be counted. We have to do what we can in communities to encourage participation. The Census will increase jobs by 5%. Many people don't know that the Census is fundamental to infrastructure. The data is used to guide federal spending on programs important to our community. It is written into the constitution. It is used to determine the number of seats each state gets in Congress, which determines the number of electoral votes each state has in presidential elections. The Census is also critical because it is a matter of equity. A Census timeline and overview was presented. The Census is about three important things: Power, Money and Data. The Census is about representation. A map was shown which indicated which states might gain or lose seats in the House based on the Census results.

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	Regarding funding; the Census counts guide the distribution of federal dollars for many programs such as Food, Healthcare, SNAP, WIC, school lunches, Medicaid, Title 1 and Section 8 for example. In 2016, Minnesota received nearly \$15.5 billion in federal allocations – about \$2,800 per person. In addition, it is about data. The data reveals demographic trends like population growth, density, age and racial/ethnic make-up that is used for infrastructure, public services planning and policymaking. The Census needs Census workers and have received only 30% of the applications we need so far. The application deadline closes Feb 1, so we are focusing our outreach efforts. Without enough census workers there is a higher risk of not counting a lot of people, so we have to promote census participation and help coordinate census outreach activities. The Census currently has seven sub-committees and also community partnerships to do community engagement on our behalf. We are looking for organizations that can reach some of those communities to do the outreach on our behalf. The Racial and Health Equity Team has devoted funds and contracted with organizations and invested in other tools and resources as well. We are looking at access to apartment buildings for census takers. They will be trained as to how to inform residents about why it is important and how we ensure privacy. It is critical to let people know that their personal information is protected. What can we do? Apply to become a census taker. Bi-lingual census takers in certain areas are needed. Shifts are flexible and the wage has just increased from \$16.50/hour to \$22.00 per hour. We want to raise awareness about what it is and why it is important. People may need help filling out the forms, so we need trained staff. Residents can send in the questionnaires or go online to fill them out.
Chronic Disease Prevention Updates • SHIP Year 5 Plan • Evaluation Plans • Rollover Funding Brainstorming • Correctional Health Work • MEDA • 1817 • Other items	We are doing a deeper dive for evaluations using results-based accountability. We continue to brainstorm about rollover funding and initiatives such as smarter lunch rooms, breastfeeding friendly worksites and tobacco cessation training for mental health staff. Ramey County has over 4000 employees to expand friendly work spaces. Possible funding would go towards Law Enforcement Center kitchen upgrades and menu assessments to provide healthier foods, grants for garden projects, more student interns to assist with decreasing food waste, improve food security projects, and the expansion of breastfeeding friendly spaces where we could provide breast milk from prison moms to their kids by providing freezers and pumps. Within Correctional Health, we are potentially working to hire more Correctional Health Workers and assist probation officers, in addition to screening for SNAP at our Ramsey County Correctional Facility.

Screen/Intervene	At our 1919 University Avenue location we want to train mental health
Updates	staff in tobacco cessation, integrating chronic disease work within the
	flow of the clinic.
Carissa Glatt (SHIP Grant Coordinator), Saint Paul – Ramsey County Public Health	flow of the clinic. The Moving Equity Data into Action grant is a two-year grant with three phases: (1) to conduct community gatherings to learn about myths, beliefs and trends to breastfeeding in African American communities. (2) to host an Equity Action Lab using the information from community gatherings. (3) Co-develop breastfeeding message with community members and disseminate with community partners. We are in year two of five of our 1817 program that focuses on Cardiovascular and Diabetes work. Our 1817 staff sits on the Minnesota Department of Health statewide Healthy People Prevention Team to bring local work to the state. We are working within our new housing department to screen for Snap RX, provide food resource guides and train on offering the TAP program to reduce transportation barriers to those with housing instability. We have used SHIP funds to train on community engagement principles. What does a community need for a livable community? Two questions we should ask: what are the pressing needs in the community and how can we align with other projects? Another goal is to have Public Health at the table for planning with Parks, Public Works and community development. Please email Carissa Glatt at <u>Carissa.Glatt@co.ramsey.mn.us</u> with any
	questions by the end of January 2020. We are looking for people to be on the review teams for future Requests for Proposal (RFP's). Heather Peterson and Gene Nichols volunteered for
	the RFP review team.
Announcements and Updates	No announcements or updates.
Next Meeting: February 5, 2020 SHIP Community Leadership Team/ Community Health Improvement Plan (CHIP) Action Team	

Minutes taken by: Mary Nystrom

Motion to adjourn (7:30PM) passed by affirmation of the committee.

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