

Public Health Council

STATE OF WISCONSIN

MINUTES OF THE MEETING OF APRIL 8, 2005

Council Members Present: Ayaz Samadani (Chair); Sandy Anderson (Vice-Chair); Gary Gilmore (Secretary); Bevan Baker; Jayne Bielecki; Christopher Fischer; Catherine Frey; Terri Kramolis; Charles LaRoque; Corazon Loteyro; Richard Perry; Elizabeth Raduege (by teleconference); Kurt Reed; JoAnn Weidmann; Julie Willems Van Dijk

Council Members Absent: John Bartkowski (Vice-Chair); José Avila; Stephen Hargarten; Loren Leshan; June Munro; Douglas Nelson; Thai Vue; Jeanan Yasiri

Division of Public Health Staff: Herb Bostrom, Interim Administrator; Pat Guhleman; Stacia Jankowski; Steve Marshall; Margaret Schmelzer; Dennis Tomczyk; Kevin Wymore

Guest Presenters: Beth Lucas, Wisconsin WIC Association; Patti Herrick, WIC Director; Maureen Busalacchi, SmokeFree Wisconsin; Kurt Eggebrecht, Appleton City Health Department

Others Present: Matthew Stanford, Wisconsin Hospital Association

Call to Order

At 10:05 a.m., Dr. Ayaz Samadani called the meeting to order. A quorum was deemed present (15 members were present).

Review of Minutes from February 11, 2005

Herb Bostrom asked to have a few items clarified in the minutes, including:

1. Whether the reference to the Public Health Advisory Committee on page 2 third paragraph from the bottom was correct or if this was in fact referring to the State Health Plan Oversight Workgroup (SHPOW). JoAnn Weidmann clarified that this suggestion in fact came from SHPOW.
2. Who had seconded the nomination of Sandy Anderson for Vice Chair as it had not been recorded. Dr. Kurt Reed indicated that he had seconded the motion. Dr. Samadani asked that in the future the Council members identify themselves to ensure that the information is correctly recorded in the minutes.
3. Under "Status Tracking Document" on page 3, correctly refer to "Equitable, adequate and stable financing" as an infrastructure or system priority.
4. Refer to disparities as "eliminating disparities" in the first paragraph under "Status Tracking Document" on page 3.

A motion to approve the minutes with the recommended changes was made and seconded. The motion passed, and the minutes were approved.

Open Forum

Dr. Samadani explained that in the interest of making this Council more accessible to the public, the Council will be providing 15 minutes at the beginning of each meeting as an open forum. This time is allocated for the public or interested organizations to speak to the Council. Individuals do not need to be invited to speak. Dr. Samadani said that he would like the members to let any interested parties know about the open forum.

Nominations and Election of a Secretary

Dr. Samadani explained that José Avila had volunteered to be Secretary, but will not be able to make the time commitment required and therefore has resigned from this position. Dr. Samadani reviewed the expectations of the Secretary, including the need to be present for the Council meetings as well as being a member of the Executive Committee. He referred the members to the Rules of Order and Procedure for more detailed information about this position.

Dr. Gary Gilmore volunteered to serve as Secretary. Terri Kramolis seconded the nomination. No other nominations were put forward, and Dr. Gilmore was unanimously elected.

SmokeFree Wisconsin Briefing

Maureen Busalacchi, Executive Director of SmokeFree Wisconsin, provided a presentation that addressed the toll of tobacco use in Wisconsin as well as the following legislation that is being proposed: 1) Increased taxation on tobacco products and 2) Preemption of local ordinances.

Ms. Busalacchi explained that supporting a tax increase of one dollar per pack would save lives by reducing the number of adults that smoke, reducing the number of kids that start smoking, and assisting people in decreasing their consumption. In addition, the revenue raised could be put back into the health care system, including Medicaid. She reported that 15 percent of the Medicaid budget is used for caring for individuals with tobacco-related diseases. She urged the Council to support the \$10 million appropriation and an additional \$15 million from the increase in funds from raising the tax on tobacco products for the Tobacco Control and Prevention Program. The CDC recommends a minimum of \$31 million for this program in Wisconsin.

Ms. Busalacchi reported that currently Senator Scott Fitzgerald and Representative Jeff Fitzgerald are routing a bill through the Legislature to preempt local ordinances and possibly the smoke-free status of municipal buildings. She encouraged the Council to oppose this legislation in order to preserve the progress that has been made in Wisconsin to make indoor air cleaner.

Dr. Charles Laroche asked if casino workers have been studied. Ms. Busalacchi responded that casino workers have not been specifically studied, but studies have been done on individuals that work in restaurants and bar areas. Their risk of being diagnosed with lung cancer is four times greater than in the general population, even if they do not smoke.

Bevan Baker expressed concern that children were still able to access tobacco products and asked about the status of enforcement in Wisconsin. Ms. Busalacchi reported that the Wisconsin WINS program, part of the Tobacco Control and Prevention Program, has been successful in reducing the rate of illegal sales to minors. In 1999, state law preempted locals from performing the compliance checks, which resulted in a high rate of illegal sales and threatened \$10 million in federal block grants. Both Mr. Baker and Ms. Busalacchi expressed concern over the state of the rules that are in place for dealing with illegal sales.

Kurt Eggebrecht, Appleton City Health Department, said that Tuesday, April 5, 2005, an ordinance was passed banning smoking in all workplaces in Appleton. This was an effort that took approximately five years to bring to fruition. With the new legislation that is being proposed, all this work may be preempted. Mr. Eggebrecht encouraged the Council to support efforts to reduce smoking at the local level and throughout the state and to stop this legislation from becoming law. Mr. Eggebrecht stressed that local initiatives are important, especially in light of the number of people who supported this effort by voting for clean indoor air in the workplace.

Julie Willems Van Dijk proposed that in the interest of protecting the public's health and forwarding the goals of the state health plan regarding tobacco the Council make the following recommendations:

1. Support the one-dollar per pack tax increase on cigarettes;

2. Support the \$10 million for tobacco control and prevention as proposed in the budget, and use an additional \$15 million from the tobacco tax increase to supplement that for tobacco prevention;
3. Use the remainder of the tax increase funds for Medicaid to ameliorate the cost of caring for individuals with tobacco-related disease; and
4. Encourage the Governor to veto any legislation that would preempt local indoor air ordinances.

Sandy Anderson seconded this motion.

Mr. Baker suggested broadening the scope of the resolution put forward to cover any conceivable and appropriate action to allow the resolution to be flexible and longstanding. Jayne Bielecki agreed and suggested that we focus on our position as a smoke-free state. She referenced movements in California and Europe to limit smoking in public places, such as beaches.

Dr. Gilmore said he thinks it is important for the Council to take action, but would like to make certain that the first action taken by the Council is formed in an appropriate context and has strategic direction. He suggested that the Council table the motion for discussion and development of the proper context. Dr. Gilmore suggested that in addressing the context, the following aspects should be considered: 1) Access, 2) Enforcement, 3) Sufficient resources, and 4) Local control. He called for the opportunity to prepare a thoughtful resolution to be reviewed by the Council. Within ten days, the Council would be contacted with a draft resolution. Dr. Corazon Loteyro seconded this motion. The motion carried with a vote of seven to six. Dr. Samadani abstained from voting.

The Executive Committee met over lunch to discuss the language that needed to be drafted. Staff were to provide draft language to the Executive Committee, with the expectation that once comments from Council members were received, staff would incorporate these comments, and send the resolution to the full Council for review. The preference was that all comments should be sent by e-mail, but comments could also be made by voice mail.

Committee Business

Dr. Samadani provided an explanation of the Public Health Council governance structure, as described in a document that had been developed. This document addresses the interaction between the committees, the chair, membership, and roles and responsibilities for each committee. Copies of the governance structure will be provided to the Council at the next meeting.

Emergency Preparedness Committee

Dr. Kurt Reed provided an overview of the Emergency Preparedness Committee. He said that the Joint Committee, the Emergency Preparedness Committee's predecessor, had developed a mission statement that was adopted by the new Committee. Dr. Reed explained the complexity of integrating the Committee with other existing committees and councils that address emergency preparedness, such as the Homeland Security Council. He explained that the discussion continually returned to funding, and drove home the fragility of these programs due to the dependency on funding.

Dr. Samadani asked why there were only four meetings scheduled for the Committee, when the Council is meeting six times per year. Dr. Reed responded that the Committee could discuss this at its next meeting.

Dr. Gilmore explained that he has been working on a Health Resources and Services Administration (HRSA) proposal, "Wisconsin Terrorism/Natural Catastrophe Preparedness: A Statewide Training Project." This proposal is built upon a proposal that was submitted and approved last year, but was unfunded. This may be the only proposal that is submitted to the HRSA from Wisconsin, and is meant to be a cooperative and collaborative effort. Therefore, he has made an effort to get feedback from all interested parties. Dr. Gilmore talked about the partners that have been involved with the proposal's development. He explained that he is looking for feedback on the proposal prior to the submission deadline, May 19, 2005.

Mr. Fischer said that in looking at this proposal, he has identified that first responders have been omitted in the development of this document. He suggested that the Office of Justice Assistance might have some groups that could respond to this.

Executive Committee

Dr. Samadani reviewed the roles of the committees in relation to the Council.

State Health Plan Committee

Dr. Samadani introduced Richard Perry as the chair of the State Health Plan Committee, and said that the committee consists of six council members and seven members from previous advisory groups. He identified the four priorities that have been identified for the Committee.

Pat Guhleman provided an overview of the State Health Plan Progress Chart, which is an expansion of a document that the Council has already seen. She explained that this is one way for the Council to see what is happening in relation to each of the objectives. Ms. Guhleman also explained the schedule that is being proposed to have Division of Public Health staff present to the Council on each of the state health plan priorities. The information to be included in these presentations should answer many of the Council's questions about the status of each of the priorities in the state health plan.

Rules of Order and Procedure

Ms. Anderson reviewed the changes that have been made to the Rules of Order and Procedure, which include:

- Moved the language regarding the official oath immediately following item one, appointments, in the same section.
- A statement was added to 1.05(1) about the inclusion of current officers and the previous chair as members of the Executive Committee.
- The issue of being able to hold only one position, but being able to be nominated for more than one position was clarified by removing this language in 1.06(5)(b). Individuals can only be nominated for one position.
- A statement was added to 1.06(5) to indicate that the nominating committee will consider the attendance records of possible nominees. The expectation was that nominees would not miss more than one-third of the Council meetings.
- Consistently referring to the calendar year whenever referring to the Council activities.

There was no time for discussion of these changes.

Report on WIC Funding

Patti Herrick provided an overview of the history and activities of the Supplemental Nutrition Program for Women, Infants, and Children (WIC). She explained that the WIC program provides screening, appropriate nutritious food specific to nutritional need, nutrition education for at-risk clients, and follow-up visits for qualified individuals. WIC serves about 113,000 individuals a month, through 70 agencies throughout Wisconsin. The WIC program encompasses a large infrastructure through the presence of dietitians and nutritionists in nearly every county, implementation and maintenance of surveillance systems, and promotion of healthy eating and breastfeeding through education and other methods.

Ms. Herrick explained that the WIC program is funded through the United States Department of Agriculture (USDA), with funding of approximately 73% for food and 27% for nutrition education services. These funds have been increasing and are based on the price of food and the projected number of clients to be served through the program. In years in which the economy is suffering, there is greater

demand, affecting the program. In addition, as food prices increase, as they have been in the last year, the funding is more easily depleted. Ms. Herrick said that in the past, there has been state funding for the WIC program in the form of GPR and Temporary Assistance for Needy Families (TANF), which have since been eliminated. Mr. Fischer asked if the lack of state contributions is a national trend. Ms. Herrick said that maybe twenty states receive state funds for WIC, but that number continues to decline.

Mr. Baker asked what the strategy is for dealing with migrants and undocumented aliens. Ms. Herrick explained that WIC serves only residents, whether they are documented or not.

Dr. Gilmore asked about the promotion of breastfeeding, including collaboration with other programs. Ms. Herrick explained that breastfeeding is encouraged, and many of the WIC sites are breastfeeding friendly. The WIC program also has a breast pump program to help encourage and support breastfeeding, but ultimately it is a personal choice, and formula is provided for those who choose not to breastfeed.

Dr. Gilmore asked about accessibility of WIC in more rural areas of the state. Ms. Herrick said that 55 of the 70 WIC programs are located in local health departments. In some areas, WIC is provided to a number of counties by one agency, but because of the effort to provide satellite locations, Ms. Herrick does not feel that access has ever been an issue. Catherine Frey asked if there are any regional disparities. Ms. Herrick responded that she does not think any disparities exist, because of the efforts to maintain access to the program.

Beth Lucas, President of the Wisconsin WIC Association and WIC Director for Eau Claire County, provided a handout that identifies projects threatened by the reduction of funding at the local level, such as providing satellite offices. She touched on a few of these, and asked for the support of the Council. Dr. Gilmore asked Ms. Lucas how she thought the Council could make a difference. Ms. Lucas said that the Wisconsin WIC Association would like to see the Council draft a resolution that would increase funding to the local agencies by \$1.5 million. Dr. Gilmore asked where the WIC Association proposes these additional funds would come from. Ms. Lucas explained that the local agencies were receiving 79.3% of WIC funding in 2000 and 73.0% in 2005. The WIC Association is proposing a more equitable split between the state and local funds, essentially reducing state-level funding for WIC by \$1.5 million. If the local portion of funding continues to decrease, service will be affected through a decrease in services offered and the quality of care.

The Council took no action on this discussion.

KidsFirst Agenda Briefing

Kevin Wymore, Bureau of Health Information and Policy, provided an overview of the Governor's KidsFirst Agenda, which reflects key priorities within each agency for investments in children and families. Mr. Wymore touched on a number of budget initiatives in KidsFirst that are currently before the Legislature. These initiatives cover programs across the following departments: Health and Family Services, Workforce Development, and Public Instruction. The Governor's budget priorities address the need for a strong economy to support strong families; access to health care by preserving current eligibility and benefits for Medicaid, BadgerCare, and SeniorCare; and other KidsFirst and education initiatives.

Announcements

JoAnn Weidmann said that all Council members should have received an invitation to the Wisconsin Public Health Association conference to be held on May 17 and 18, 2005.

Agenda Items for Next Meeting

Due to the time, Dr. Samadani asked that any agenda items be submitted by e-mail.

Adjournment

Dr. Samadani adjourned the meeting at 2:24 p.m.