WELCOME/INTRODUCTIONS/APPROVAL OF MEETING NOTES (Mark)
Mark opened the meeting and everyone introduced themselves. Paul moved and Greg seconded motion to approve the November notes as submitted.

EXECUTIVE COMMITTEE (Mark)
- Election of Executive Committee Officers (Proposed slate – Trevor Evers, Chair; Mark Collier, Vice Chair; Karen Evans, Member at Large)
  
  There were no other nominations. The slate of officers was unanimously approved.

DEPARTMENT UPDATE (Alan)
- Introduction of Chief Operating Officer, Roxanne Wolfe
  Alan introduced Roxanne Wolfe, the new Chief Operations Officer for the department. In her previous position, Roxanne was a health manager for four agricultural companies, and she is currently doing her masters work in Public Health from Loma Linda University.

- Flu Update:
  Influenza A activity is elevated. Unlike previous seasons, the strain causes more severe diseases than in previous years, and the vaccine is not a very good match to the strain. The effectiveness is only about 23%. That being said, if you received the shot, you are still 23% less likely to get the illness. The vaccine is recommended for anyone over the age of six months.

- Ebola Update:
  Fortunately, Mali is now Ebola-free. Nigeria seems to be controlled, but Guinea and Sierra Leone are still in the throes of Ebola. There are five ports of entry in the US, and we are informed by the federal government of any travelers entering the US from an Ebola-affected country. We have been working closely with our partners and feel we can appropriately respond to any suspect cases.
  - Dr. Roberts commended the health department on working closely with the hospitals.
  - Washington State has quarantine facilities that can be used if necessary.
There is a tri-county meeting every week that shares appropriate information, and Clark County is joining that group.

- **County Charter:**
  Under the new county charter, commissioners will now be called “county councilors” and the number will of councilors will increase from three to five. The county councilors will now focus on policy, while the executive and operations functions will be the responsibility of the county manager.

  If the Board of County Councilors choose to do so, they could create a different style of board of health; perhaps adding additional representatives. However, he doesn’t see that changing in the near future.

  *It was suggested having an introductory meeting with the board this spring.*

(4) **ACES UPDATE/PLANNING**

- **Refresher (review of last meeting/logic model)**
  Back in the fall, the council began a more intentional discussion about ACES. Up until that point, the council had been gathering information and learning about the issue through:

  - Community partner discussions about programs that address ACES
  - Community data about ACES (e.g., Clay Mosher and Sheldon Levy - WSU)
  - Retreat with Laura Porter. She helped ground us in ACES and the council came up with four focus areas: (1) educate and engage, (2) develop professional skills and abilities, (3) assure preventive support for people affected by ACES, and, (4) create a platform for systematic and continuous learning above what......Logic model...and talked about a

  Janis provided copies of a draft logic model and challenged the council to consider how to meld this with the logic model the council already has. The council provided feedback.

  ![ACES logic model](https://example.com/aces_logic_model.png)

  *Feedback:*
  - The draft makes the information more manageable. *(Karen)*
  - Education is very important for new officers; maybe expand around law enforcement. *(Roy)*
    - Janis will expand under Educate – looking for specific opportunities, e.g., law enforcement, emergency room, housing shelters.
  - To the Stakeholders – add:
    - Media
    - Neighborhood associations
    - Civic leaders and elected officials
  - Long-term Outcome
    - “Decrease the impact of ACEs in Clark County”
**Community Health Foundation proposal (Cyndie)**
The ESD 112 has received an AWARE grant, the purpose of which is to assist local educational agencies to begin to support the training of school personnel and other adults who interact with youth in both school settings and communities to detect and respond to mental illness in children and youth, including how to encourage adolescents and their families experiencing these problems to seek treatment. Battle Ground was one of the communities awarded the money to do “mental health train the trainers” for youth mental health first aid. Public Health staff began wondering if we could bring together a broader mixture by adding ACES to the training. A proposal will be submitted by the end of the month.

*Public Health staff will draft a letter for the Council’s support and approval.*

**Planning for community collaboration around ACES (Cyndie)**
Public Health took Joan’s advice and began getting people together around the table to collaborate on an ACES project. The initial group met and concluded that the *Raising of America* would be a perfect launch around ACES, perhaps an event at a location such at Kiggins Theater. At the next meeting the agenda will be putting together a plan for the event. A larger group of partners has been identified, the result of which is to decide what we want to do about this as a community.

**MCH grant/ACES web page**
Public Health received a Maternal Child Health block grant which focuses on ACES. There is overlap with the grant deliverables and the Council’s work on ACES, in particular with training on ACES and provide that to other partners, as well as training others for an ACES pilot projects. Possibilities might be to create a web site to share information or establishing a faith-based coffee group to foster resilience and support for children and families.

*Discussion:*

- With regard to shelters, do we want to make recommendations about training in trauma-informed response; parenting? *(Karen)*
- With Neighborhood Alliance, we can identify groups, posting PSA messages using social media as a public campaign. *(Greg)*
  - Yes, we are struggling as out how to get the information out. *(Janis)*
  - What about the WIC programs which target moms? *(Joan)*
  - Other suggested vehicles for getting the word out:
    - Food banks
    - Juvenile departments and CPS
    - Seniors
    - Connecting struggling kids with mentors
    - Hospitals – getting information to providers
- Consistent packet of information that could be shared with providers; emergency department team for sure; urgent care facilities. *(Rhonda)*
- We need to consider the key people to be invited to a launch event. *(Cyndie)*
  - Judges and the CAAT Team (Dr. Copeland) Child Abuse Assessment Team
(5) **CALENDAR PLANNING FOR 2015**

Public health managers have already brainstormed some topics for PHAC input, including in part:

- ACES, E-cigarette policy, accreditation, quality council, health care access, health element (health in all policies), and strategic planning.
- The calendar presented is organized by month with PHAC key topics, regular topic items, topics needing follow-up, and topics for the Board of Health.
- To what should Public Health pay most attention? Strategically, when should Public Health engage PHAC?

Group ideas included:

- Water contamination
- Childhood obesity/activity/fructose/dietary
- Recreational marijuana use and education
- Non-emergent response structures within EMS system
- Affordable housing
- Access to mental health and substance abuse treatment
- Profile of county demographics, health disparities – immigrants and refugee populations
- Marijuana use
  - Data
  - Driving under influence
  - Juvenile and adult
  - 20-year summary of research
- Immunizations
  - Adults
- Foreign animal disease (Betsy can get dates out for trainings) (April)
- Naloxone
- Public health ethics
- Public health in action

The following calendar reflects the suggested calendar items:

(6) **PUBLIC COMMENT:**

Mathew Volk is impressed with ACES as a public health issue, and that there is a model to address it.

(7) **ADJOURNMENT**

The meeting adjourned at 7:50.